

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

**2001**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning **JUNE 1**, 2001, and ending **MAY 31**, 2002

B Check if applicable

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization

**SOUTH TEXAS SYMPHONY ASSOCIATION**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

**P. O. BOX 2832**

City or town, state or country, and ZIP + 4

**MCALLEN TX 78505-2832**

D Employer identification number

**74-1939277**

E Telephone number

**(956) 393-2293**

F Accounting method  Cash  Accrual

Other (specify) ▶

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

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates?  Yes  No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? **N/A**  Yes  No (If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling?  Yes  No

I Enter 4-digit GEN ▶ **N/A**

G Web site ▶

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

K Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **291,091**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)**

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a	163,949		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)	1d	163,949		
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	106,189		
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5			
	6a Gross rents	6a			
	b Less rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other investment income (describe ▶ )	7				
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	8a				
	b Less cost or other basis and sales expenses	8b			
	c Gain or (loss) (attach schedule)	8c			
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d				
9 Special events and activities (attach schedule)					
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	18,368			
b Less direct expenses other than fundraising expenses	9b	24,400			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c	(6,032)			
10a Gross sales of inventory, less returns and allowances	10a				
b Less cost of goods sold	10b				
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11 Other revenue (from Part VII, line 103)	11	2,585			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	266,691			
Expenses	13 Postage and printing (from line 44, column (B))	13	162,744		
	14 Management and general (from line 44, column (C))	14	65,355		
	15 Fundraising (from line 44, column (D))	15	5,027		
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17	233,126		
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	33,565		
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	(43,968)		
	20 Other changes in net assets or fund balances (attach explanation)	20			
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	(10,403)		

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2001)

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**Part II**

**Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25	49,095	6,729	37,693
26	Other salaries and wages	26			4,673
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33			
34	Telephone	34	2,501		2,501
35	Postage and shipping	35	2,065		2,065
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38	12,787	12,512	275
39	Travel	39	3,138	491	2,293
40	Conferences, conventions, and meetings	40	5,401		5,401
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42	1,981		1,981
43	Other expenses not covered above (itemize) a INSURANCE	43a	2,039		2,039
	b PROFESSIONAL SERVICES	43b	4,800		4,800
	c CONCERT EXPENSES	43c	132,919	132,919	
	d MARKETING AND PROMOTION	43d	10,867	10,093	774
	e OFFICE EXPENSE	43e	5,533		5,533
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	233,126	162,744	65,355

Joint Costs Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III**

**Statement of Program Service Accomplishments** (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? PROMOTION OF MUSIC IN THE RIO GRANDE VALLEY AND THE PRODUCTION OF ELEVEN CONCERTS  
 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)

a	<u>PROMOTION OF MUSIC IN THE RIO GRANDE VALLEY AND THE PRODUCTION OF ELEVEN CONCERTS</u> DONATED SERVICES AMOUNTED TO \$26,937.	(Grants and allocations \$ _____)	162,744
b	-----	(Grants and allocations \$ _____)	
c	-----	(Grants and allocations \$ _____)	
d	-----	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		162,744

**Part IV Balance Sheets** (See Specific Instructions on page 24 )

Note		(A)		(B)		
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year		
<b>Assets</b>	45	Cash — non-interest-bearing	13,865	45	30,941	
	46	Savings and temporary cash investments		46		
	47a	Accounts receivable	13,681			
	b	Less allowance for doubtful accounts		1,700	47c	13,681
	48a	Pledges receivable				
	b	Less allowance for doubtful accounts			48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)				
	b	Less allowance for doubtful accounts			51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54	Investments — securities (attach schedule) <span style="float: right;">▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV</span>			54	
	55a	Investments — land, buildings, and equipment basis	35,522			
	b	Less accumulated depreciation (attach schedule)	30,373	4,311	55c	5,149
56	Investments — other (attach schedule)			56		
57a	Land, buildings, and equipment basis					
b	Less accumulated depreciation (attach schedule)			57c		
58	Other assets (describe ▶ _____ )			58		
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74)		19,876	59	49,771		
<b>Liabilities</b>	60	Accounts payable and accrued expenses	42,333	60	21,924	
	61	Grants payable		61		
	62	Deferred revenue	21,511	62	38,250	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a	Tax-exempt bond liabilities (attach schedule)		64a		
	b	Mortgages and other notes payable (attach schedule)		64b		
	65	Other liabilities (describe ▶ _____ )		65		
<b>66 Total liabilities</b> (add lines 60 through 65)		63,844	66	60,174		
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 67 through 69 and lines 73 and 74</b>					
	67	Unrestricted	(45,968)	67	(54,088)	
	68	Temporarily restricted	2,000	68	43,685	
	69	Permanently restricted		69		
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 70 through 74</b>					
	70	Capital stock, trust principal, or current funds		70		
	71	Paid-in or capital surplus, or land, building, and equipment fund		71		
	72	Retained earnings, endowment, accumulated income, or other funds		72		
<b>73 Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		(43,968)	73	(10,403)		
<b>74 Total liabilities and net assets/fund balances</b> (add lines 66 and 73)		19,876	74	49,771		

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



Part VI Other Information (See Specific Instructions on page 27)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instructions	81a	N/A
b	Did the organization file Form 1120-POL for this year?	81b	N/A
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	26,937
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	X
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed		N/A
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	2
91	The books are in care of <u>SUZANNE MCDONALD</u> Telephone no <u>(956) 393-2293</u> Located at <u>UNIV OF TX-PAN AMERICAN, EDINBURG, TX</u> ZIP + 4 <u>78539</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32 )

	Unrelated business income		Excluded by section 512.513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>Note</b> Enter gross amounts unless otherwise indicated					
<b>93</b> Program service revenue					
<b>a</b> TICKET SALES					106,189
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments					
<b>96</b> Dividends and interest from securities					
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property					
<b>b</b> not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events			01	(6,032)	
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue <b>a</b> MISCELLANEOUS			01	2,585	
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))				(3,447)	106,189
<b>105</b> Total (add line 104, columns (B), (D), and (E))					102,742

**Note** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 32 )

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	FEES SUPPORT PROGRAMS AND CONCERTS THAT FURTHER PUBLIC EDUCATION IN THE ARTS

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33 )

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions on page 33 )

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- Note** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Date 10-25-2002

LD, PRESIDENT



<b>Part III</b> Statements About Activities (See page 2 of the instructions )	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	X
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions )		
<b>a</b> Sale, exchange, or leasing of property?	2a	X
<b>b</b> Lending of money or other extension of credit?	2b	X
<b>c</b> Furnishing of goods, services, or facilities?	2c	X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
<b>e</b> Transfer of any part of its income or assets?	2e	X
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below )	3	X
<b>4</b> Do you have a section 403(b) annuity plan for your employees?	4	X
<b>Note</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments <span style="float:right">N/A</span>		

<b>Part IV</b> Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions )				
The organization is not a private foundation because it is (Please check only <b>ONE</b> applicable box )				
<b>5</b> <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)				
<b>6</b> <input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V )				
<b>7</b> <input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)				
<b>8</b> <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)				
<b>9</b> <input type="checkbox"/> A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____				
<b>10</b> <input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the <b>Support Schedule</b> in Part IV-A )				
<b>11a</b> <input checked="" type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the <b>Support Schedule</b> in Part IV-A )				
<b>11b</b> <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the <b>Support Schedule</b> in Part IV-A )				
<b>12</b> <input type="checkbox"/> 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 charitable, etc , 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) (Also complete the <b>Support Schedule</b> in Part IV-A )				
<b>13</b> <input type="checkbox"/> An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3) )				
Provide the following information about the supported organizations (See page 5 of the instructions )				
<table style="width:100%; border-collapse: collapse;"> <tr> <th style="width:75%; text-align:center;">(a) Name(s) of supported organization(s)</th> <th style="width:25%; text-align:center;">(b) Line number from above</th> </tr> <tr> <td style="border-bottom: 1px solid black;">N/A</td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>	(a) Name(s) of supported organization(s)	(b) Line number from above	N/A	
(a) Name(s) of supported organization(s)	(b) Line number from above			
N/A				

**14**  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions )

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

**Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28)	88,097	95,352	52,963	65,457	301,869
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	192,482	186,437	201,631	154,507	735,057
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975				843	843
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	2,696	1,087	545	1,183	5,511
<b>23</b> Total of lines 15 through 22	283,275	282,876	255,139	221,990	1,043,280
<b>24</b> Line 23 minus line 17	90,793	96,439	53,508	67,483	308,223
<b>25</b> Enter 1% of line 23	2,833	2,829	2,551	2,220	
<b>26 Organizations described on lines 10 or 11</b> a Enter 2% of amount in column (e), line 24					<b>26a</b> 6,164
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					<b>26b</b> 0
c Total support for section 509(a)(1) test Enter line 24, column (e)					<b>26c</b> 308,223
d Add Amounts from column (e) for lines 18 <u>843</u> 19 _____ 22 <u>5,511</u> 26b <u>0</u>					<b>26d</b> 6,354
e Public support (line 26c minus line 26d total)					<b>26e</b> 301,869
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 97.94 %
<b>27 Organizations described on line 12</b> a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year (2000) _____ (1999) _____ (1998) _____ (1997) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified person"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2000) _____ (1999) _____ (1998) _____ (1997) _____					
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b> _____
d Add Line 27a total _____ and line 27b total _____					<b>27d</b> _____
e Public support (line 27c total minus line 27d total)					<b>27e</b> _____
f Total support for section 509(a)(2) test Enter amount from line 23, column (e) <b>27f</b> _____					<b>27f</b> _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> _____ %
<b>28 Unusual Grants</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15 NONE					

**Part V Private School Questionnaire** (See page 7 of the instructions ) N/A  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
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32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )			
<hr/>			
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )			
<hr/>			
<hr/>			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions) N/A  
 (To be completed ONLY by an eligible organization that filed Form 5768)

Check  a if the organization belongs to an affiliated group Check  b if you checked "a" and "limited control" provisions apply

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred )

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38	Total lobbying expenditures (add lines 36 and 37)	38		
39	Other exempt purpose expenditures	39		
40	Total exempt purpose expenditures (add lines 38 and 39)	40		
41	Lobbying nontaxable amount Enter the amount from the following table —	} 41		
	<b>If the amount on line 40 is —</b>			<b>The lobbying nontaxable amount is —</b>
	Not over \$500,000			20% of the amount on line 40
	Over \$500,000 but not over \$1,000,000			\$100,000 plus 15% of the excess over \$500,000
	Over \$1,000,000 but not over \$1,500,000			\$175,000 plus 10% of the excess over \$1,000,000
	Over \$1,500,000 but not over \$17,000,000			\$225,000 plus 5% of the excess over \$1,500,000
	Over \$17,000,000	\$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42		
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

**Caution** If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

**Part VI-B Lobbying Activity by Nonelecting Public Charities**  
 (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions )

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h )			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h )			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



**SOUTH TEXAS SYMPHONY ASSOCIATION  
FORM 990  
EIN# 74-1939277  
MAY 31, 2002**

	<u>MAY 31, 2001</u>	<u>MAY 31, 2002</u>
<u>PART IV, PAGE 3, LINE 60</u>		
ACCOUNTS PAYABLE	42,333	21,924
<u>PART IV, PAGE 3, LINE 62</u>		
DEFERRED REVENUES - SUBSCRIPTIONS	<u>21,511</u>	<u>38,250</u>

SOUTH TEXAS SYMPHONY ASSOCIATION  
BOARD OF DIRECTORS  
MAY 31, 2002

BOARD MEMBER NAME AND TITLE	ADDRESS
SUZANNE MCDONALD                      PRESIDENT	1401 CAMILLIA, MCALLEN, TX 78501
DAVID GUERRERO                         ADVISORY	5414 N 5TH ST , MCALLEN, TX 78503
YVONNE ANDERSON                      EXECUTIVE	2424 CRESTVIEW, EDINBURG, TX 78539
ANNA BOHART                            TREASURER	2608 GRIFFIN PKWY, MISSION, TX 78572
WILLIAM BURNS                         EXECUTIVE	2312 FOX RUN DR , MISSION, TX 78572
STEVE CRAIN                            EXECUTIVE	401 BYRON NELSON, MCALLEN, TX 78503
RUTH CREWS                            ADVISORY	1316 LARK, MCALLEN, TX 78504
LINDA MONCADA                         EXECUTIVE	2312 GREENBRIAR SQ , MCALLEN, TX 78503
DR MARIAN MONTA                       ADVISORY	3527 PLAZAS DEL LAGO, EDINBURG, TX 78539
DR VIVIAN MUNN                        ADVISORY	1419 POST OAKS RD , EDINBURG, TX 78539
CHUCK OLSON                            ADVISORY	100 W MOORE RD , #16, PHARR, TX 78577
Sr MARY ANN POTTS                      ADVISORY	504 MORELOS, RANCHO VIEJO, TX
GUSTAVO PENA, JR                      ADVISORY	1225 CENTRAL BLVD, #904 BROWNSVILLE, TX 78520
NORMA PRIOLO                          ADVISORY	1701 E 24TH PLACE, MISSION, TX 78572
CECILIO RODRIGUEZ                    VICE-PRES	1409 ZINNIA AVE, MCALLEN, TX 78504
MARICELLA RODRIGUEZ                 ADVISORY	1409 ZINNIA AVE, MCALLEN, TX 78504
GLEANOR SYMONS                        ADVISORY	602 N VICTORIA RD, MH #190 DONNA, TX 78537
PAULETTE SACA                         EXECUTIVE	109 CONDOR, MCALLEN, TX 78504
DR MARCUS SMOLENSKY                 ADVISORY	1101 DOVE AVE #57 , MCALLEN, TX 78504
ROSA VALENCIA                         ADVISORY	612 E NEWPORT LANE, MCALLEN, TX 78501
DR MATT WEBER                         SECRETARY	2000 N 23RD ST , MCALLEN, TX 78501

SOUTH TEXAS SYMPHONY ASSOCIATION  
BOARD OF DIRECTORS  
MAY 31, 2002

BOARD MEMBER NAME AND TITLE	ADDRESS
THE HON LINDA YANEZ            ADVISORY	7308 N 30TH ST , MCALLEN, TX 78504
CAROL BROWN                    ADVISORY	2404 EBONY AVE, MCALLEN, TX 78501
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MARIANNE JELINEK              ADVISORY	707 TULIP, MCALLEN, TX 78504
ALICE JOHNSON                 ADVISORY	825 N 5TH, HARLINGEN, TX 78550
MICHELLE KINNEY               ADVISORY	130 E ULEX, MCALLEN, TX 78504
DR ROBERTO MANGOO-KARIM    ADVISORY	1901 S FIRST ST , STE 600, MCALLEN, TX 78503
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LISA OLIVEIRA                 ADVISORY	2415 DORADO DRIVE, MISSION, TX 78572
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DR MARVIN TAVAREZ            ADVISORY	1713 LARKSPUR, MCALLEN, TX 78501
JANET WALLACE                 ADVISORY	P O BOX 3512, MCALLEN, TX 78502
MISTY WELLS                    ADVISORY	P O BOX 40007, SOUTH PADRE ISLAND, TX
PETER DABROWSKI               EXEC DIR	P O BOX 2832, MCALLEN, TX 78502
CHRISTOPHER MUNN	1419 POST OAKS RD, EDINBURG, TX 78539
GLEND A BOYKIN	2701 N MCCOLL RD, B-5, MCALLEN, TX 78501