

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

2004

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 2004 calendar year, or tax year beginning 7/01/04, and ending 6/30/05

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: OKLAHOMA PHILHARMONIC SOCIETY, INC. D Employer identification no. 73-1328565. E Telephone number. F Accounting method: Accrual.

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

G Website: WWW.OKCPHILHARMONIC.ORG

J Organization type: 501(c)(3)

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.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 4,115,658

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Table with columns for Revenue (1-11), Expenses (13-17), and Net Assets (18-21). Includes sub-tables for 1a-c, 6a-c, 8a-c, 9a-c, 10a-c. Total revenue: 4,115,658. Total expenses: 3,818,139. Net assets at end of year: 4,091,372.

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SEE STATEMENT 1

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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 page 22 of the instructions.)

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 \$ _____ non-cash \$ _____ )	22			
23 Specific assistance to individuals	23			
24 Benefits paid to or for members	24			
25 Compensation of officers, directors, etc.	25			
26 Other salaries and wages	26	1,583,146	1,059,217	414,162
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31	32,246		32,246
32 Legal fees	32			
33 Supplies	33	17,973	3,343	11,696
34 Telephone	34	23,445	1,822	21,623
35 Postage and shipping	35	35,462	4,417	26,940
36 Occupancy	36	137,721	95,733	41,988
37 Equipment rental and maintenance	37	153,724	151,286	
38 Printing and publications	38	5,831		2,450
39 Travel	39	13,798	12,680	1,118
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42	57,862	39,952	17,910
43 Other expenses not covered above (itemize) a	43a			
b <b>SEE STATEMENT 2</b>	43b	1,756,931	992,385	435,657
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	3,818,139	2,360,835	1,005,790

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 page 25 of the instructions.)

What is the organization's primary exempt purpose?

**▶ PROVIDING ORCHESTRA PERFORMANCES FOR THE PUBLIC**

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) & (4) orgs. & 4947(a)(1) trusts, but optional for others.)

a <b>SYMPHONY ORCHESTRA PERFORMANCES FOR THE GENERAL PUBLIC FOR CULTURAL AND INTELLECTUAL BENEFIT OF THE COMMUNITY AT LARGE</b>	(Grants and allocations \$ _____ )	2,360,835
b	(Grants and allocations \$ _____ )	
c	(Grants and allocations \$ _____ )	
d	(Grants and allocations \$ _____ )	
e Other program services (attach schedule)	(Grants and allocations \$ _____ )	
f <b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services)		<b>2,360,835</b>

**Part IV Balance Sheets** (See page 25 of the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A)		(B)	
		Beginning of year		End of year	
45	Cash-non-interest-bearing	450,145	45	401,615	
46	Savings and temporary cash investments	1,218,378	46	917,776	
47a	Accounts receivable	370,353			
b	Less: allowance for doubtful accounts		47c	370,353	
48a	Pledges receivable	712,217			
b	Less: allowance for doubtful accounts		48c	712,217	
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	184,419	53	142,712	
54	Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54		
55a	Investments-land, buildings, and equipment: basis				
b	Less: accumulated depreciation (attach schedule)		55c		
56	Investments-other (attach schedule)	SEE STMT 3	2,241,826	56	2,231,348
57a	Land, buildings, and equipment: basis	623,053			
b	Less: accumulated depreciation (attach schedule) SEE STATEMENT 4				
57b	SEE STATEMENT 4	501,634	164,697	57c	121,419
58	Other assets (describe SEE STATEMENT 5 )			58	330,000
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	4,809,679	59	5,227,440	
60	Accounts payable and accrued expenses	19,404	60	38,921	
61	Grants payable		61		
62	Deferred revenue		62		
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 SEE STATEMENT 6 )	1,089,837	65	1,097,147	
66	<b>Total liabilities</b> (add lines 60 through 65)	1,109,241	66	1,136,068	
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>					
67	Unrestricted	727,609	67	739,431	
68	Temporarily restricted	1,364,921	68	1,744,033	
69	Permanently restricted	1,607,908	69	1,607,908	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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		
73	<b>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)	3,700,438	73	4,091,372	
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	4,809,679	74	5,227,440	

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 page 28 of the instructions.)		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		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.		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
78b	If "Yes," has it filed a tax return on Form 990-T for this year?	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		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?		X
80b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions		
81b	Did the organization file Form 1120-POL for this year?		X
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?	X	
82b	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.)		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A	
85b	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.	N/A	
85c	Dues, assessments, and similar amounts from members		
85d	Section 162(e) lobbying and political expenditures		
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85h	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?	N/A	
86a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
86b	Gross receipts, included on line 12, for public use of club facilities		
87a	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
87b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
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		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> 0 ; section 4912 <input type="checkbox"/> 0 ; section 4955 <input type="checkbox"/> 0		
89b	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		X
89c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
89d	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 <input type="checkbox"/> OK		
90b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)		134
91	The books are in care of <input type="checkbox"/> OKLAHOMA PHILHARMONIC SOC Located at <input type="checkbox"/> OKLAHOMA CITY, OK Telephone no. <input type="checkbox"/> 405-232-7575 ZIP + 4 <input type="checkbox"/> 73102		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92		



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

**2004**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization  <b>OKLAHOMA PHILHARMONIC SOCIETY, INC.</b>	Employer identification number  <b>73-1328565</b>
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**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl ben plans & deferred comp	(e) Expense account and other allowances
<b>NONE</b>				

Total number of other employees paid over \$50,000	▶ 0	
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**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<b>NONE</b>		

Total number of others receiving over \$50,000 for professional services	▶	
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**Part III Statements About Activities** (See page 2 of the instructions.)

		Yes	No
1	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 I 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.		<b>X</b>
2	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.)		
a	Sale, exchange, or leasing of property?		<b>X</b>
b	Lending of money or other extension of credit?		<b>X</b>
c	Furnishing of goods, services, or facilities?		<b>X</b>
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		<b>X</b>
e	Transfer of any part of its income or assets?		<b>X</b>
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments )		<b>X</b>
b	Do you have a section 403(b) annuity plan for your employees?		<b>X</b>
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		<b>X</b>
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		<b>X</b>

**Part IV 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 **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶
- 10  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 **Support Schedule** in Part IV-A.)
- 11a  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 **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  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 **Support Schedule** in Part IV-A.)
- 13  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.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety. Section 509(a)(4) (See page 5 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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28 )	1,420,842	1,890,528	1,478,093	1,345,187	6,134,650
<b>16</b> Membership fees received					0
<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	1,820,866	1,605,985	1,681,394	1,100,522	6,208,767
<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	13,210	19,234	28,387	47,035	107,866
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
<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					0
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets			5,053	6,501	11,554
<b>23</b> Total of lines 15 through 22	3,254,918	3,515,747	3,192,927	2,499,245	12,462,837
<b>24</b> Line 23 minus line 17	1,434,052	1,909,762	1,511,533	1,398,723	6,254,070
<b>25</b> Enter 1% of line 23	32,549	35,157	31,929	24,992	

<b>26 Organizations described on lines 10 or 11:</b>	<b>a</b> Enter 2% of amount in column (e), line 24	▶	<b>26a</b>	0
<b>b</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 2000 through 2003 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>	
<b>c</b> Total support for section 509(a)(1) test: Enter line 24, column (e)		▶	<b>26c</b>	
<b>d</b> Add: Amounts from column (e) for lines:	18 _____ 19 _____		<b>26d</b>	
	22 _____ 26b _____		<b>26e</b>	
<b>e</b> Public support (line 26c minus line 26d total)		▶	<b>26e</b>	
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))		▶	<b>26f</b>	%

<b>27 Organizations described on line 12:</b>	<b>a</b> 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:				
	(2003) 103,887 (2002) 56,975 (2001) 77,308 (2000) 56,104				
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), 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:					
	(2003) _____ (2002) _____ (2001) _____ (2000) _____				
<b>c</b> Add: Amounts from column (e) for lines:	15 6,134,650 16 _____		<b>27c</b>	12,343,417	
	17 6,208,767 20 _____ 21 _____		<b>27d</b>	294,274	
<b>d</b> Add: Line 27a total.	294,274 and line 27b total _____		<b>27e</b>	12,049,143	
<b>e</b> Public support (line 27c total minus line 27d total)			<b>27f</b>	12,462,837	
<b>f</b> Total support for section 509(a)(2) test: Enter amount from line 23, column (e)		▶			
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))		▶	<b>27g</b>	96.6806%	
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		▶	<b>27h</b>	0.8655%	

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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.

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

		N/A	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.)			
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?  If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	32d		
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?  If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h		
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		





**Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances**

<u>Description</u>	<u>Amount</u>
OTH AMTS INCLUDED ON FINANCIAL STMTS NOT ON RETURN	\$ 93,415
TOTAL	\$ <u>93,415</u>

## Federal Statements

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
PROGRAM ADVERTISING OTHER EXPENSES	101,994		101,994	
EXPENSES				
BAD DEBT	2,650		2,650	
BANK CHARGES	32,761		32,761	
BOX OFFICE	87,030	87,030		
CONSULTING FEES	307,325	4,916	1,196	301,213
CONTRACT LABOR	5,923		5,923	
DONOR BENEFITS	19,698		19,698	
DUES & SUBSCRIPTIONS	10,004	736	8,783	485
EQUIPMENT MAINTENANCE	4,983		4,983	
GUEST ARTISTS	470,135	470,135		
INSURANCE	44,571		44,571	
LIBRARY EXPENSE	18,078	18,078		
LICENSES	21,253	21,253		
MEETINGS	6,018	1,419	4,324	275
MEMBERSHIP DRIVES	12,149			12,149
MUSIC EXPENSE	15,484	15,484		
NEWSLETTERS	4,323		4,323	
OTHER EXPENSES	73,761	52,838	6,156	14,767
PROGRAM PRINTING	46,643		46,643	
SALES TAX EXPENSE	119,073	119,073		
SEASON CAMPAIGN	98,349		98,349	
TECHNICAL & BACKSTAGE	176,403	176,403		
TELEMARKETING	53,303		53,303	
USHERS & SECURITY	25,020	25,020		
TOTAL	<u>\$ 1,756,931</u>	<u>\$ 992,385</u>	<u>\$ 435,657</u>	<u>\$ 328,889</u>

## Federal Statements

**Statement 3 - Form 990, Part IV, Line 56 - Other Investments**

Description	Beginning of Year	End of Year	Basis of Valuation
BENEFICIAL INTEREST IN ASSETS HELD BY FOUNDATIONS (SFAS 136)	\$ 2,241,826	\$ 2,231,348	
TOTAL	<u>\$ 2,241,826</u>	<u>\$ 2,231,348</u>	

**Statement 4 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment**

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
FURNITURE AND EQUIPMENT	\$ 608,469	\$ 443,772	\$ 623,053	\$ 501,634
TOTAL	<u>\$ 608,469</u>	<u>\$ 443,772</u>	<u>\$ 623,053</u>	<u>\$ 501,634</u>

**Statement 5 - Form 990, Part IV, Line 58 - Other Assets**

Description	Beginning of Year	End of Year
ENDOWMENT PLEDGES RECEIVABLE	\$	\$ 330,000
TOTAL	<u>\$ 0</u>	<u>\$ 330,000</u>

**Statement 6 - Form 990, Part IV, Line 65 - Other Liabilities**

Description	Beginning of Year	End of Year
ADVANCE TICKET SALES AND FEES	\$ 1,052,287	\$ 949,417
DEFERRED SPONSORSHIPS	37,550	47,730
ADVANCE PAYABLE		100,000
TOTAL	<u>\$ 1,089,837</u>	<u>\$ 1,097,147</u>

**Statement 7 - Form 990, Part IV-A - Other Revenue Included on Financial Statements**

<u>Description</u>	<u>Amount</u>
CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSETS HELD BY OTHERS (SFAS 136).	\$ 93,415
TOTAL	<u>\$ 93,415</u>

## Federal Statements

## Statement 8 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

Name	Address	City, State, Zip	Title	Average Hours	Compensation	Benefits	Expenses
JOEL A LEVINE	7611 CLAYTON DR	OKLAHOMA CITY OK 73120	MUSIC DIRECT	40	111,000	0	0
RONALD E WALKER	2020 NW 22ND	OKLAHOMA CITY OK 73120	EXECUTIVE DI	40	92,000	0	0
MICHAEL E JOSEPH	211 NORTH ROBINSON	OKLAHOMA CITY OK 73102	PAST PRES		0	0	0
DUKE R LIGON	1717 KINGSBURY LANE	OKLAHOMA CITY OK 73116	PRESIDENT		0	0	0
JAMES B CRAWLEY	105 N HUDSON STE800	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
DOUGLAS J STUSSI	10601 N PENN AVE	OKLAHOMA CITY OK 73120	PRES ELECT		0	0	0
MARTHA V WILLIAMS	6722 N COUNTRY CLUB DR.	OKLAHOMA CITY OK 73116	DIRECTOR		0	0	0
PATRICK B ALEXANDER	1515 GLENWOOD AVE	OKLAHOMA CITY OK 73116	DIRECTOR		0	0	0
BOB G BUNCE	12501 ARROWHEAD TERRACE	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
WILLIAM B CLEARY	1607 DORCHESTER DRIVE	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
KENNETH W CROUCH	P.O. BOX 25861	OKLAHOMA CITY OK 73125	DIRECTOR		0	0	0
JOSEPH M FLECKINGER	3129 PINE RIDGE ROAD	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
JOHN A FROST	6117 WINFIELD DRIVE	OKLAHOMA CITY OK 73162	DIRECTOR		0	0	0
JANE B HARLOW	6500 N HILCREST AVE	OKLAHOMA CITY OK 73116	DIRECTOR		0	0	0
JEAN HARTSUCK	6909 GRAND BLVD	OKLAHOMA CITY OK 73116	DIRECTOR		0	0	0
JAMES R HATFIELD	6300 NW 109 ST	EDMOND OK 73013	DIRECTOR		0	0	0
JOHN A HENRY, III	P.O. BOX 14586	OKLAHOMA CITY OK 73113	DIRECTOR		0	0	0
CARLOS E JOHNSON	3124 LAMP POST LANE	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
MARK R KANTER	13909 WELLSBURG CT	EDMOND OK 73013	DIRECTOR		0	0	0

## Federal Statements

Statement 8 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees  
(continued)

Name	Address	City, State, Zip	Title	Average Hours	Compensation	Benefits	Expenses
JOHN W NICHOLS	7300 NICHOLS RD	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
MARY NICHOLS	7300 NICHOLS RD	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
PAMELA H SHDEED	1500 BUTTRAM ROAD	OKLAHOMA CITY OK 73112	DIRECTOR		0	0	0
JEANNETTE SIAS	3900 S BRYANT	EDMOND OK 73013	DIRECTOR		0	0	0
DONNA VOGEL	1721 GUILFORD LANE	OKLAHOMA CITY OK 73120	DIRECTOR		0	0	0
LIL ROSS	6923 AVONDALE COURT	OKLAHOMA CITY OK 73116	V PRESIDENT		0	0	0
MARTHA BURGER	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	TREASURER		0	0	0
STEVEN C. AGEE	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	SECRETARY		0	0	0
DR. CAROLE HALL HARDEMAN	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
ALBERT J. LINDSEY	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
DEBRA B. MCKINNEY	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
KENNETH W. MCKINNEY	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
LADONNA MEINDERS	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
KATIE PRICE	428 W. CALIFORNIA, STE 210	OKLAHOMA CITY OK 73102	DIRECTOR		0	0	0
MRS. WILLIAM J. ROSS	6923 AVONDALE COURT	OKLAHOMA CITY OK 73116	DIRECTOR		0	0	0