

NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit <http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx>



Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2008
Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 09-01-2008 and ending 08-31-2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Indiana Symphony Society Inc	D Employer identification number 35-0998627
		Doing Business As	E Telephone number (317) 262-1100
		Number and street (or P O box if mail is not delivered to street address) Room/suite 32 East Washington Street No 600	G Gross receipts \$ 26,621,965
		City or town, state or country, and ZIP + 4 Indianapolis, IN 462042919	
F Name and address of Principal Officer JACQUELYN GROTH 32 East Washington Street No 600 Indianapolis, IN 462042919		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions) H(c) Group Exemption Number	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Web site: www IndianapolisSymphony.org			
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other		L Year of Formation 1937	M State of legal domicile IN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities To inspire, entertain, educate and challenge through innovative programs and symphonic music performed at the highest artistic level		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	70
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	70
	5 Total number of employees (Part V, line 2a)	5	562
	6 Total number of volunteers (estimate if necessary)	6	2,000
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C) b Net unrelated business taxable income from Form 990-T, line 34	7a 7b	266,075 -19,790
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 19,476,223	Current Year 17,684,543
	9 Program service revenue (Part VIII, line 2g)	7,908,567	7,781,089
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,231	439
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	738,112	539,865
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,132,133	26,005,936
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		20,335,488	24,622,120
16a Professional fundraising fees (Part IX, column (A), line 11e) b (Total fundraising expenses, Part IX, column (D), line 25 <u>1,484,090</u>)			0
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		11,324,103	10,997,678
18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))		31,659,591	35,619,798
19 Revenue less expenses Subtract line 18 from line 12		-3,527,458	-9,613,862
Net Assets or Fund Balances		Beginning of Year	End of Year
	20 Total assets (Part X, line 16)	8,381,217	6,454,314
	21 Total liabilities (Part X, line 26)	11,151,338	18,838,297
	22 Net assets or fund balances Subtract line 21 from line 20	-2,770,121	-12,383,983

Part II Signature Block

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

Please Sign Here	***** Signature of officer	2010-07-07 Date		
	PRESIDENT VP FINANCE & STRATEGIC PLANNING Type or print name and title			
Paid Preparer's Use Only	Preparer's signature <input type="checkbox"/> Stephen Blake	Date 2010-07-07	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4 BLUE & CO LLC 12800 N MERIDIAN ST SUITE 400 CARMEL, IN 46032		EIN <input type="checkbox"/> Phone no <input type="checkbox"/> (317) 848-8920	
	May the IRS discuss this return with the preparer shown above? (See instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission
 TO INSPIRE, ENTERTAIN, EDUCATE AND CHALLENGE THROUGH INNOVATIVE PROGRAMS AND SYMPHONIC MUSIC PERFORMED AT THE HIGHEST ARTISTIC LEVEL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? Yes No
 If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 31,111,530 including grants of \$ 0) (Revenue \$ 7,781,089)
 THE INDIANAPOLIS SYMPHONY ORCHESTRA IS ONE OF ONLY 18 ORCHESTRAS IN THE COUNTRY THAT PERFORMS A YEAR-ROUND SCHEDULE OF MORE THAN 200 CONCERTS AND EDUCATION PROGRAMS THE INDIANAPOLIS SYMPHONY IS THE LARGEST PERFORMING ARTS ORGANIZATION IN THE STATE OF INDIANA, AS IT ATTRACTS AND RETAINS 87 OF THE MOST GIFTED ORCHESTRAL MUSICIANS IN THE UNITED STATES AND ENGAGES THE BEST CONDUCTORS AND SOLOISTS IN THE WORLD EACH SEASON, THE INDIANAPOLIS SYMPHONY PRESENTS A WIDE REPERTOIRE OF ORCHESTRAL MUSIC, INCLUDING COMMISSIONS OF NEW MUSIC, BOTH CLASSICAL AND POPS RECENT COMMISSIONS INCLUDE GABRIELA LENA FRANK'S PEREGRINOS, WHICH WAS THE CENTERPIECE OF A TWO-YEAR LONG OUTREACH PROJECT WITH THE HISPANIC COMMUNITY IN INDIANAPOLIS CONCERTS INCLUDE PROGRAMS OF CLASSICAL MUSIC, SYMPHONIC POPS PERFORMANCES, FAMILY ORIENTED PROGRAMS, HOLIDAY PROGRAMS, HAPPY HOUR AT THE SYMPHONY SERIES FOR YOUNG PROFESSIONALS, THE OUTDOOR SUMMER SERIES, AND MANY MORE THE INDIANAPOLIS SYMPHONY ORCHESTRA'S ANNUAL ATTENDANCE IS IN EXCESS OF 350,000 PATRONS EACH YEAR The Indianapolis symphony orchestra is dedicated to leading the field in music education Symphony musicians and staff create pioneering learning opportunities for more than 80,000 participants throughout the state through a variety of projects which impact students and adults in the Indianapolis Symphony Orchestra's Learning Community The original and award-winning Arts Everyday program is a fully integrated arts education curriculum addressing state standards in non-artistic subjects and reaches more than 2,300 elementary students each year In addition, the ISO promotes a series of Innovative Family Concerts and Side-BY-Side concerts and presents a wide variety of Workshops and resources in schools and communities across central Indiana The Symphony on the Move program sends chamber ensembles to perform where people gather in workplaces, public libraries, and community centers The Metropolitan Youth Orchestra is also part of the Indianapolis Symphony Orchestra family and continues to create family enrichment opportunities through music instruction for dozens of inner-city youth and their parents each year The historic Hilbert Circle Theatre on Monument Circle in downtown Indianapolis is home to the Indianapolis Symphony Orchestra, and the adjacent Symphony Centre office building is owned and operated by the organization's foundation Outside the theatre, the Indianapolis Symphony Orchestra can be heard live in several Indiana communities and around the world through www.instantcore.com, a site that offers concert recordings for download on computers and mp3 devices As a leading member of the arts community in Indianapolis, the Indianapolis Symhony Orchestra collaborates on a regular basis with other arts companies including Indianapolis Opera, Dance Kaleidoscope, the International Violin Competition of Indianapolis, and American Pianists Association














4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)












4d Other program services (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 31,111,530 *Must equal Part IX, Line 25, column (B).*

Part IV Checklist of Required Schedules

	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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? 	2 Yes	
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	No
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any accounts where 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	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21, 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	No
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 	11 Yes	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12 Yes	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the U S ?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	No
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	No
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 Yes	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 Yes	
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	No
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 	23 Yes	
24a 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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	No
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	
25a Section 501(c)(3) and 501(c)(4) 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	No
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 	25b	No
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 	26	No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 	27	No

Part IV Checklist of Required Schedules *(Continued)*

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> 	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> 	Yes	
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> 	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	Yes	
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> 		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> 		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> 	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 		No
36	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> 		No
37	Did the organization conduct more than 5 percent 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> 		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 212		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 562		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	Yes	
4a	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)?		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		No
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
a	Did the organization make any taxable distributions under section 4966?		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?		No
10	<i>Section 501(c)(7) organizations.</i> Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
11	<i>Section 501(c)(12) organizations.</i> Enter		
a	Gross income from members or shareholders		
	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
	11b		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
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?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	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		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization? Describe the process in Schedule O	Yes	
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?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <u>IN</u>
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> own website <input type="checkbox"/> another's website <input checked="" type="checkbox"/> upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization JACQUELYN GROTH 32 East Washington Street No 600 Indianapolis, IN 462042919 (317) 262-1882

Part VIII **Statement of Revenue**

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues					
		1b					
	c	Fundraising events 139,156					
		1c					
	d	Related organizations 11,031,311					
		1d					
	e	Government grants (contributions) 177,269					
	1e						
f	All other contributions, gifts, grants, and similar amounts not included above 6,336,807						
	1f						
g	Noncash contributions included in lines 1a-1f \$ 249,713						
h	Total (Add lines 1a-1f)	17,684,543					
Program Service Revenue	2a	TICKET SALES AND FEE I	900,099	7,781,089	7,781,089		
		Business Code					
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f	\$ 7,781,089					
Other Revenue	3	Investment income (including dividends, interest other similar amounts)	2,151			2,151	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross Rents	(i) Real	386,818			
			(ii) Personal				
			Less rental expenses	143,030			
			Rental income or (loss)	243,788			
	d	Net rental income or (loss)	243,788			243,788	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	61,907	8,069		
			(ii) Other				
			Less cost or other basis and sales expenses	65,119	6,569		
			Gain or (loss)	-3,212	1,500		
	d	Net gain or (loss)	-1,712	-1,712			
	8a	Gross income from fundraising events (not including \$ 380,979 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a					
			Less direct expenses b	368,426			
Net income or (loss) from fundraising events			12,553	12,553			
9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a		7,150				
		Less direct expenses b	50				
		Net income or (loss) from gaming activities	7,100	7,100			
10a	Gross sales of inventory, less returns and allowances a		41,532				
		Less cost of goods sold b	32,835				
		Net income or (loss) from sales of inventory	8,697	8,697			
	Miscellaneous Revenue	Business Code					
11a	ADVERTISING	541,800	266,075	266,075			
b	MISCELLANEOUS	900,099	1,652		1,652		
c							
d	All other revenue						
e	Total. Add lines 11a-11d	\$ 267,727					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	26,005,936	7,807,727	266,075	247,591		

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) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 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 governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,819,776	1,420,039	399,737	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	12,139,656	10,376,271		901,187
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,090,362	6,998,347	92,015	
9	Other employee benefits	2,543,169	1,708,966	630,287	203,916
10	Payroll taxes	1,029,157	869,681	93,036	66,440
11	Fees for services (non-employees)				
a	Management				
b	Legal	93,658	4,144	89,514	
c	Accounting	37,830		37,830	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	426,210	355,059	65,966	5,185
12	Advertising and promotion	1,439,454	1,439,454		
13	Office expenses	1,316,243	967,222	281,624	67,397
14	Information technology				
15	Royalties				
16	Occupancy	2,170,446	2,170,446		
17	Travel	48,147	18,869	24,235	5,043
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	10,961	7,709	3,252	
20	Interest	168,916		168,916	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	996,730	922,711	74,019	
23	Insurance	120,191	13,318	106,873	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	GUEST ARTISTS	2,268,310	2,268,310		
b	GENERAL PRODUCTION	762,336	762,336		
c	CONCERT FRONT OF HOUSE	202,471	202,471		
d	MUSIC ROYALTIES	168,337	168,337		
e	MUSIC & INSTRUMENT RENT	157,223	157,223		
f	All other expenses	610,215	280,617	94,676	234,922
25	Total functional expenses. Add lines 1 through 24f	35,619,798	31,111,530	3,024,178	1,484,090
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	45,074	1	284,216
	2 Savings and temporary cash investments	86,256	2	9,720
	3 Pledges and grants receivable, net	3,220,188	3	1,442,344
	4 Accounts receivable, net	743,009	4	1,119,086
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	23,544	8	
	9 Prepaid expenses and deferred charges	668,864	9	420,560
	10a Land, buildings, and equipment cost basis			
		10a 14,066,163		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 10,913,808	3,551,313	10c 3,152,355
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>		12	
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	42,969	15	26,033	
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,381,217	16	6,454,314	
Liabilities	17 Accounts payable and accrued expenses	1,856,405	17	1,400,974
	18 Grants payable		18	
	19 Deferred revenue	2,552,134	19	2,148,456
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties	4,517,275	23	6,574,649
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>	2,225,524	25	8,714,218
	26 Total liabilities. Add lines 17 through 25	11,151,338	26	18,838,297
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-7,097,408	27	-16,152,944
	28 Temporarily restricted net assets	4,327,287	28	3,768,961
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	-2,770,121	33	-12,383,983	
34 Total liabilities and net assets/fund balances	8,381,217	34	6,454,314	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes" to lines 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?	Yes	
3a	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?		No
3b	If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization
Indiana Symphony Society Inc

Employer identification number

35-0998627

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

- 1 A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i)**.
- 2 A school described in **Section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii)**. (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 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)
- 10 An organization organized and operated exclusively to test for public safety See **Section 509(a)(4)**. (See instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally Integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	15,736,324	15,482,262	18,286,720	19,476,223	17,772,926	86,754,455
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3	15,736,324	15,482,262	18,286,720	19,476,223	17,772,926	86,754,455
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						1,899,275
6 Public Support subtract line 5 from line 4						84,855,180

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	15,736,324	489,224	18,286,720	19,476,223	17,772,926	86,754,455
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	793,234	489,224	463,096	428,849	388,970	2,563,373
9 Net income from unrelated business activities, whether or not the business is regularly carried on	305,547	260,249	245,225	266,332	266,075	1,343,428
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total Support (Add lines 7 through 10)						90,661,256
12 Gross receipts from related activities, etc (See instructions)					12	40,527,817
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	93.600 %
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	88.740 %

- 16a 33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10% Facts and Circumstances Test - 2008.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- b 10% Facts and Circumstances Test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
6 Total Add lines 1-5						
7a 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Total of lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b						
11 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 IV.)						
13 Total Support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	16	

Computation of Investment Income Percentage

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h	18	

- 19a 33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Indiana Symphony Society Inc

Employer identification number 35-0998627

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, grants, and value, and questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Question, Held at the End of the Year. Rows include purpose of easements, number of easements, acreage, and monitoring details.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Question, Amount. Rows include questions about reporting art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain why in Part XIV and complete the following table

Table with 2 columns: Description (1c-1f) and Amount

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows 1a-1g.

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment, b Permanent endowment, c Term endowment

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

Table with 3 columns: Description (3a(i), 3a(ii), 3b), Yes, No

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (Investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows 1a-1e and Total.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,005,936
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	35,619,798
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-9,613,862
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-9,613,862

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	26,091,054
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	544,341
e	Add lines 2a through 2d	2e	544,341
3	Subtract line 2e from line 1	3	25,546,713
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 XIV)	4b	459,223
c	Add lines 4a and 4b	4c	459,223
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	26,005,936

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	35,704,916
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	544,341
e	Add lines 2a through 2d	2e	544,341
3	Subtract line 2e from line 1	3	35,160,575
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	4a	
b	Other (Describe in Part XIV)	4b	459,223
c	Add lines 4a and 4b	4c	459,223
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	35,619,798

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		TENANT EXPENSES 143030 FUNDRAISING & GAMING EXPENSES 368476 COST OF GOODS SOLD 32835
Part XII, Line 4b - Other Adjustments		OTHER REVENUE NETTED AGAINST EXPENSES 459223
Part XIII, Line 2d - Other Adjustments		TENANT EXPENSES 143030 FUNDRAISING & GAMING EXPENSES 368476 COST OF GOODS SOLD 32835
Part XIII, Line 4b - Other Adjustments		OTHER REVENUE NETTED AGAINST EXPENSES 459223

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization Indiana Symphony Society Inc

Employer identification number 35-0998627

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations, b Email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events.

- 2a Did the organization have a written or oral agreement with any individual... 2b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization.

- 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		GALA (event type)	MAESTRO OPEN (event type)	4 (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	342,889	73,150	104,096	520,135
	2 Less Charitable contributions	133,446		5,710	139,156
	3 Gross revenue (line 1 minus line 2)	209,443	73,150	98,386	380,979
Direct Expenses	4 Cash Prizes				
	5 Non-cash Prizes				
	6 Rent/Facility costs				
	7 Other direct expenses	230,262	34,317	103,847	368,426
	8 Direct expense summary Add lines 4 through 7 in column (d) ▶				368,426
	9 Net income summary Combine lines 3 and 8 in column (d) ▶				12,553

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses			50	50
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					50
8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶					7,100

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities <u>IN</u>		
a	Is the organization licensed to operate gaming activities in each of these states?	9a Yes	
b	If "No," Explain _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	No
b	If "Yes," Explain _____ _____		
11	Does the organization operate gaming activities with nonmembers?	11 Yes	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	No

13 Indicate the percentage of gaming activity operated in	
a The organization's facility	13a 0 %
b An outside facility	13b 100 000 %

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ► ADAM WHITE

Address ► 32 EAST WASHINGTON ST
INDIANAPOLIS, IN 46204

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address

Name ► _____

Address ► _____

16 Gaming manager information

Name ► CAROL ANN BARRETT

Gaming manager compensation ► \$ 0

Description of services provided ► ASSOCIATE DIRECTOR OF SPECIAL EVENTS

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ 19,653

	Yes	No
15a		No
17a	Yes	

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

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

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Indiana Symphony Society Inc

Employer identification number

35-0998627

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items
- | | |
|---|---|
| <input type="checkbox"/> First class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) |

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- | | |
|--|--|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a

a Receive a severance payment or change of control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1b		No
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7	Yes	
8		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Simon Crookall	(i)	227,919	25,000	7,657	2,123	19,234	281,933	229,682
	(ii)							
JACK EVERLY	(i)	199,637		1,377	500	9,474	210,988	219,397
	(ii)							
THOMAS RAMSEY	(i)	161,581		1,564	1,421	20,534	185,100	158,246
	(ii)							
K BLAKE SCHLABACH	(i)	164,762		90		29,292	194,144	174,015
	(ii)							
ZACHARY DEPUE	(i)	161,349		9		9,324	170,682	
	(ii)							
QUENTIN QUINN	(i)	145,459	1,237	258		20,014	166,968	147,805
	(ii)							
JANE SHRINER	(i)	138,874		288	1,292	19,234	159,688	
	(ii)							
MARK NEWMAN	(i)	133,827		184	1,246	27,602	162,859	
	(ii)							
MARIO VENZAGO	(i)	448,706				7,150	455,856	388,695
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Software ID:
Software Version:
EIN: 35-0998627
Name: Indiana Symphony Society Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Simon Crookall	(i) (ii)	227,919	25,000	7,657	2,123	19,234	281,933	229,682
JACK EVERLY	(i) (ii)	199,637		1,377	500	9,474	210,988	219,397
THOMAS RAMSEY	(i) (ii)	161,581		1,564	1,421	20,534	185,100	158,246
K BLAKE SCHLABACH	(i) (ii)	164,762		90		29,292	194,144	174,015
ZACHARY DEPUE	(i) (ii)	161,349		9		9,324	170,682	
QUENTIN QUINN	(i) (ii)	145,459	1,237	258		20,014	166,968	147,805
JANE SHRINER	(i) (ii)	138,874		288	1,292	19,234	159,688	
MARK NEWMAN	(i) (ii)	133,827		184	1,246	27,602	162,859	
MARIO VENZAGO	(i) (ii)	448,706				7,150	455,856	388,695

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

**To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990**

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization
Indiana Symphony Society Inc

Employer identification number
35-0998627

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	X	41	112,059	FMV
10 Securities—Closely held stock				
11 Securities—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	X	12	24,371	COST
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (describe <u>HOTEL ROOMS</u>)	X	1	2,500	COST
26 Other (describe <u>ADVERTISING</u>)	X	2	34,500	COST
27 Other (describe <u>COMPACT DISCS</u>)	X	1	4,500	COST
28 Other (describe <u>SERVICES</u>)	X	2	18,619	COST
Other (describe <u>DECORATIONS</u>)	X	2	24,988	COST
Other (describe <u>COMPUTERS</u>)	X	1	2,500	REPLACEMENT COST
Other (describe <u>SUPPLIES</u>)	X	1	2,300	COST
Other (describe <u>TENT RENTAL</u>)	X	1	23,376	COST

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes", describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes	
b If "Yes", describe in Part II			
33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is checked, describe in Part II			

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization
Indiana Symphony Society Inc

Employer identification number

35-0998627

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		AS PART OF THE CONFLICT OF INTEREST PROCESS, BOARD MEMBERS AND MANAGEMENT EMPLOYEES ARE ASKED TO DISCLOSE ANY DIRECT BUSINESS RELATIONSHIPS THESE RELATIONSHIPS ARE REVIEWED TO ENSURE THAT ADEQUATE APPROVALS ARE SECURED FOR BUSINESS RELATIONSHIPS WITH THE ORGANIZATION, AND THAT BUSINESS RELATIONSHIPS BETWEEN BOARD MEMBERS DO NOT IMPACT THE GOVERNANCE STRUCTURE OF THE ORGANIZATION

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE 990 IS REVIEWED BY THE AUDIT COMMITTEE A COPY OF THE 990 IS PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED ANNUALLY TO ALL BOARD MEMBERS AND MANAGEMENT WITH SPENDING AUTHORITY IN ADDITION, EACH PERSON IS REQUIRED TO SIGN AND RETURN A FORM INDICATING THEY HAVE READ THE POLICY AND DISCLOSED ANY CONFLICTS OF INTEREST

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		COMPENSATION FOR THE CEO AND DEPARTMENT HEADS ARE DETERMINED BY THE EXECUTIVE PERFORMANCE AND COMPENSATION COMMITTEE, WHICH REPORTS TO THE BOARD OF THE INDIANAPOLIS SYMPHONY ORCHESTRA

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON VERBAL OR WRITTEN REQUEST

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS

Identifier	Return Reference	Explanation
FORM 990, PART I, LINE 15	SALARIES, OTHER COMPENSATION, EMPLOYEE BENEFITS	THE COMPONENTS OF THESE EXPENSES ARE AS FOLLOWS 2007 2008 COMPENSATION \$13,830,426 \$13,959,432 PENSION 2,565,822 7,090,362 OTHER BENEFITS 2,900,488 2,543,169 PAYROLL TAXES 1,038,752 1,029,157 ----- TOTAL \$20,335,488 \$24,622,120 THE PENSION EXPENSE INCREASED SIGNIFICANTLY IN THE CURRENT YEAR, DUE TO A PENSION LIABILITY ADJUSTMENT OF \$6,176,157 FOR UNREALIZED LOSSES ON THE PLAN'S ASSETS

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

▶ **Attach to Form 990. To be completed by organizations that answer "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**
▶ **See separate instructions.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Indiana Symphony Society Inc

Employer identification number
35-0998627

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
INDIANAPOLIS SYMPHONY ORCHESTRA FOUNDATION INC 32 EAST WASHINGTON ST NO 600 INDIANAPOLIS, IN462012919 35-1812636	FINANCIAL SUPPORT OF INDIANA SYMPHONY SOCIETY	IN	510(C)(3)	11C	

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproportionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(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

Part V Transactions with Related Organizations

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

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?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e	Yes	
1f		No
1g		No
1h		No
1i		No
1j	Yes	
1k	Yes	
1l		No
1m	Yes	
1n	Yes	
1o		No
1p	Yes	
1q		No
1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	INDIANAPOLIS SYMPHONY ORCHESTRA FOUNDATION INC	C	11,031,311
(2)	INDIANAPOLIS SYMPHONY ORCHESTRA FOUNDATION INC	J	1,250,000
(3)			
(4)			
(5)			
(6)			

Additional Data

Software ID:
Software Version:
EIN: 35-0998627
Name: Indiana Symphony Society Inc

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Simon Crookall , President and CEO	37 50	X		X				260,576	0	21,357
Don Altemeyer , DIRECTOR	2 00	X						0	0	0
Robert A Anker , PAST CHAIRMAN	2 00	X		X				0	0	0
HON ALEX M AZAR II , DIRECTOR	2 00	X						0	0	0
CHARLENE BARNETTE , DIRECTOR	2 00	X						0	0	0
Frank Basile , DIRECTOR	2 00	X						0	0	0
DENNIS L BASSETT , DIRECTOR	2 00	X						0	0	0
BARRY J BENTLEY , DIRECTOR	2 00	X						0	0	0
Alpha Blackburn , DIRECTOR	2 00	X						0	0	0
John A Bratt , DIRECTOR	2 00	X						0	0	0
MARY CLARE BROADBENT , DIRECTOR	2 00	X						0	0	0
JOHN CANNON , DIRECTOR	2 00	X						0	0	0
ERICA CHAPPELL , DIRECTOR	2 00	X						0	0	0
Margaret Chen , DIRECTOR	2 00	X						0	0	0
Andrea D Cranfill , DIRECTOR	2 00	X						0	0	0
Rollin M Dick , DIRECTOR	2 00	X						0	0	0
Margot L Eccles , DIRECTOR	2 00	X						0	0	0
Christina Bodurow Erwin , DIRECTOR	2 00	X						0	0	0
Megan Fowler , DIRECTOR	2 00	X						0	0	0
Bradley S Fuson , DIRECTOR	2 00	X						0	0	0
CHARLES J GARCIA , DIRECTOR	2 00	X						0	0	0
Carolyn S Hardman , DIRECTOR	2 00	X						0	0	0
Tomisue Hilbert , DIRECTOR	2 00	X						0	0	0
Peter W Howard PhD , DIRECTOR	2 00	X						0	0	0
Kathy L Humphrey , DIRECTOR	2 00	X						0	0	0
ANN HAMPTON HUNT , DIRECTOR	2 00	X						0	0	0
Laura Ingham , DIRECTOR	2 00	X						0	0	0
Joyce Irwin , DIRECTOR	2 00	X						0	0	0
Robert S Kaspar , Chair	2 00	X		X				0	0	0
WOODY KELLEY , DIRECTOR	2 00	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Alvin E Kite Jr , DIRECTOR	2 00	X						0	0	0
Kay F Koch , DIRECTOR	2 00	X						0	0	0
Kay Kuenker , DIRECTOR	2 00	X						0	0	0
martha D Lamkin , DIRECTOR	2 00	X						0	0	0
Lawrence E Lawhead , DIRECTOR	2 00	X						0	0	0
SARAH LECHLEITER , DIRECTOR	2 00	X						0	0	0
Eric A Manterfield , SECRETARY	2 00	X		X				0	0	0
Illene K Maurer , DIRECTOR	2 00	X						0	0	0
Bruce C McCaw , DIRECTOR	2 00	X						0	0	0
Marni McKinney , DIRECTOR	2 00	X						0	0	0
Michael A McRobbie , DIRECTOR	2 00	X						0	0	0
Karen H Mersereau , Treasurer	2 00	X		X				0	0	0
Alexander D Mih MD , DIRECTOR	2 00	X						0	0	0
mark d miles , DIRECTOR	2 00	X						0	0	0
RODERICK H MORGAN , DIRECTOR	2 00	X						0	0	0
James T Morris , DIRECTOR	2 00	X						0	0	0
John M Mutz , DIRECTOR	2 00	X						0	0	0
Jackie Nytes , DIRECTOR	2 00	X						0	0	0
IZABELA OZDEMIR , DIRECTOR	2 00	X						0	0	0
Kay Pashos , DIRECTOR	2 00	X						0	0	0
Linda L Pence , DIRECTOR	2 00	X						0	0	0
Linda Poulter , DIRECTOR	2 00	X						0	0	0
Josette C Rathbun , DIRECTOR	2 00	X						0	0	0
Ken Renkens MD , DIRECTOR	2 00	X						0	0	0
Fred E Schlegel , DIRECTOR	2 00	X						0	0	0
Thomas A Schlehuber , DIRECTOR	2 00	X						0	0	0
Alice K Schloss , DIRECTOR	2 00	X						0	0	0
YVONNE SHAHEEN , DIRECTOR	2 00	X						0	0	0
RICHARD R SKILES , DIRECTOR	2 00	X						0	0	0
Christopher A Slapak , DIRECTOR	2 00	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Alan C Stanford , DIRECTOR	2 00	X						0	0	0
James B Steichen MD , DIRECTOR	2 00	X						0	0	0
DAWN TABLER , DIRECTOR	2 00	X						0	0	0
KEVIN TAYLOR , DIRECTOR	2 00	X						0	0	0
John R Thornburgh , DIRECTOR	2 00	X						0	0	0
Amb Randall L Tobias , DIRECTOR	2 00	X						0	0	0
Peter S Ward , DIRECTOR	2 00	X						0	0	0
David E Wilcox PE , DIRECTOR	2 00	X						0	0	0
Richard D Wood , DIRECTOR	2 00	X						0	0	0
C Daniel Yates , DIRECTOR	2 00	X						0	0	0
JACK EVERLY , pops conductor	37 50				X			201,014	0	9,974
THOMAS RAMSEY , VP/GENERAL MANAGER	37 50				X			163,145	0	21,955
K BLAKE SCHLABACH , ORCHESTRA PERS MGR	37 50					X		164,852	0	29,292
ZACHARY DEPUE , CONCERTMASTER	37 50					X		161,358	0	9,324
QUENTIN QUINN , STAGE MANAGER	37 50					X		146,954	0	20,014
JANE SHRINER , VP FINANCE/STRATEGIC PLA	37 50					X		139,162	0	20,526
MARK NEWMAN , VP MARKETING	37 50					X		134,011	0	28,848
MARIO VENZAGO , MUSIC DIRECTOR	37 50						X	448,706	0	7,150