

PUBLIC DISCLOSURE COPY

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2021**

Department of the Treasury  
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>OREGON SYMPHONY ASSOCIATION</b>		<b>D</b> Employer identification number <b>93-0446527</b>	
	Doing business as		<b>E</b> Telephone number <b>(503) 228-4294</b>	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>921 SW WASHINGTON ST. 200</b>		<b>G</b> Gross receipts \$ <b>26,858,460.</b>	
	City or town, state or province, country, and ZIP or foreign postal code <b>PORTLAND, OR 97205-2819</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	<b>F</b> Name and address of principal officer: <b>SCOTT SHOWALTER SAME AS C ABOVE</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions	

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: **WWW.ORSYMPHONY.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other **L** Year of formation: **1896** **M** State of legal domicile: **OR**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE OREGON SYMPHONY INSPIRES AUDIENCES AND BUILDS COMMUNITY BY CREATING OUTSTANDING MUSICAL</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>41</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>37</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>304</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>120</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>13,053,221.</b>	<b>16,670,994.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>0.</b>	<b>9,057,332.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>656,437.</b>	<b>476,048.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>63,739.</b>	<b>-20,420.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>13,773,397.</b>	<b>26,183,954.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>2,010,000.</b>	<b>10,000.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>7,116,733.</b>	<b>12,544,863.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>0.</b>	<b>0.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>1,457,121.</b>	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>2,347,527.</b>	<b>8,385,205.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>11,474,260.</b>	<b>20,940,068.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>2,299,137.</b>	<b>5,243,886.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>27,740,551.</b>	<b>28,423,833.</b>
		<b>6,635,404.</b>	<b>4,514,752.</b>
		<b>21,105,147.</b>	<b>23,909,081.</b>

**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.

<b>Sign Here</b>	Signature of officer		Date		
	<b>JANICE ROMANO, VP-FINANCE &amp; ADMINISTRATION</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	<b>SANG AHN</b>				<b>P00540880</b>
	Firm's name	Firm's EIN			
	<b>MCDONALD JACOBS, P.C.</b>	<b>93-0900579</b>			
	Firm's address	Phone no.			
	<b>520 SW YAMHILL ST., STE 500 PORTLAND, OR 97204</b>	<b>(503) 227-0581</b>			

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE OREGON SYMPHONY IS DEDICATED TO MOVING MUSIC FORWARD. OUR VISION IS BOLD AND ADVENTUROUS: TO INSPIRE AUDIENCES WITH EXHILARATING PERFORMANCES, PRESENT THE BEST MUSICIANS IN A WIDE RANGE OF STYLES, EXPLORE NEW ART FORMS, SHINE LIGHT ON CONTEMPORARY ISSUES AND BUILD A

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 [X] 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 [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 18,284,856. including grants of \$ 10,000. ) (Revenue \$ 9,057,332. ) THE 21/22 SEASON MARKED A JOYFUL RETURN TO LIVE PERFORMANCE, COINCIDING WITH A CELEBRATION OF OUR LANDMARK 125TH ANNIVERSARY. WE ARE MOVING MUSIC FORWARD WITH OUR INVESTMENT IN NEW MUSIC AND EMERGING ARTISTS, WHILE ALSO EXPERIMENTING WITH DIFFERENT CONCERT FORMATS AND DELIVERY METHODS FOR SHARING MUSIC DIGITALLY. AS THE COVID-19 PANDEMIC CONTINUES TO AFFECT OUR OPERATIONS, HOWEVER, WE FACE DECREASED GOVERNMENT INVESTMENT AND AN AUDIENCE THAT REMAINS CONCERNED ABOUT PUBLIC SAFETY DOWNTOWN. DESPITE THIS UNCERTAINTY, OUR BOARD, PATRONS, AND DONORS REMAIN HIGHLY ENGAGED IN THE ORGANIZATION AND ARE INVESTING IN AN EXCITING FUTURE FOR THE ARTS IN OREGON.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) INNOVATING ARTISTICALLY THROUGHOUT 21/22, WE NAVIGATED MANY COVID-RELATED PRODUCTION CHALLENGES TO BRING FULL SEASONS TO THE STAGE IN PORTLAND AND SALEM. ONGOING CHALLENGES INCLUDED INTERNATIONAL TRAVEL RESTRICTIONS, FINDING SUBSTITUTE MUSICIANS IN RESPONSE TO POSITIVE COVID TESTS, AND REPERTOIRE CHANGES THAT REQUIRED ADDITIONAL LICENSING, SOURCING OF SCORES AND PARTS, AND APPROVAL OF THE CONDUCTORS, ARTISTIC STAFF, AND MUSICIANS' UNION. DESPITE THESE BEHIND-THE-SCENES CHALLENGES, THE PRODUCT ONSTAGE REMAINED CONSISTENTLY EXCELLENT, AND WE WERE ABLE TO PRESENT MORE THAN 100 CONCERTS WITH MINIMAL CANCELATIONS, BRINGING LIFE INTO THE DOWNTOWNS OF OREGON'S TWO LARGEST CITIES. (CONTINUED ON SCH O)

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) INVESTING IN COMMUNITY THE HEALTH, SAFETY, AND WELLBEING OF OUR COMMUNITY REMAINED OUR TOP PRIORITY AS WE SHARED MUSIC WITH CHILDREN AND ADULTS FROM ALL BACKGROUNDS. WE WERE ABLE IN SOME CASES TO RETURN TO IN-PERSON WORK, WHILE PIVOTING SOME EDUCATION PROGRAMS TO DIGITAL FORMATS. OUR MUSICIANS REMAINED FLEXIBLE IN THE FACE OF CHANGING CIRCUMSTANCES. THEIR COMMITMENT TO OUR COMMUNITY GOES BEYOND THE OREGON SYMPHONY, INCLUDING COACHING STUDENTS, CREATING AND PERFORMING WITH NONPROFIT ENSEMBLES, SERVING ON COLLEGE FACULTIES, AND ORGANIZING FREE PERFORMANCES THROUGHOUT THE REGION THAT BRING JOY, HEALING, AND CONNECTION TO COUNTLESS PEOPLE. (CONTINUED ON SCH O)

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

4e Total program service expenses 18,284,856.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....	<b>3</b>	X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	<b>4</b>	X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>10</b> X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11e</b> X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>12a</b>	X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	<b>12b</b> X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions .....	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>21</b> X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Description, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Description, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (41), 1b (37), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed OR
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
JANICE ROMANO - 503-416-6319
921 SW WASHINGTON, SUITE 200, PORTLAND, OR 97205-2819

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) SCOTT SHOWALTER PRESIDENT/CEO	58.00 2.00			X				370,712.	0.	23,286.
(2) RUSSELL KELBAN VP MARKETING & STRATEGIC ENGAGEMENT	45.00				X			155,717.	0.	10,774.
(3) HILARY BLAKEMORE VP DEVELOPMENT	45.00				X			131,386.	0.	14,796.
(4) STEVE WENIG VP & GM	40.00 5.00				X			113,196.	0.	23,534.
(5) JANET PLUMMER CFOO (FORMER)	50.00 10.00			X				118,018.	0.	17,545.
(6) DAVID DANZMAYR MUSIC DIRECTOR	40.00				X			118,876.	0.	8,443.
(7) CHARLES CALMER VP ARTISTIC PLANNING	45.00				X			113,023.	0.	14,226.
(8) SARAH KWAK CONCERTMASTER	35.00				X			105,152.	0.	10,186.
(9) JANICE ROMANO VP FINANCE & ADMIN	40.00 5.00			X				69,770.	0.	8,407.
(10) BRAIZAHN JONES BOARD MEMBER/MUSICIAN	35.00	X						38,204.	0.	20,829.
(11) SERGIO CARRENO BOARD MEMBER/MUSICIAN	35.00	X						37,806.	0.	18,507.
(12) EMILY COLE BOARD MEMBER/MUSICIAN	35.00	X						32,797.	0.	11,791.
(13) RICK HINKES CO-CHAIR	20.00	X		X				0.	0.	0.
(14) TIGE HARRIS CO-CHAIR	20.00	X		X				0.	0.	0.
(15) DAN DRINKWARD VICE CHAIR	20.00	X		X				0.	0.	0.
(16) EVE CALLAHAN SECRETARY	20.00	X		X				0.	0.	0.
(17) JACK WILBORN TREASURER	20.00	X		X				0.	0.	0.



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) AMANDA TUCKER BOARD MEMBER	5.00	X						0.	0.	0.
(19) BILL EARLY BOARD MEMBER	5.00	X						0.	0.	0.
(20) CHABRE VICKERS BOARD MEMBER	5.00	X						0.	0.	0.
(21) CLIFF DEVENEY BOARD MEMBER	5.00	X						0.	0.	0.
(22) COURTNEY ANGELI BOARD MEMBER	5.00	X						0.	0.	0.
(23) DAN RASAY BOARD MEMBER	5.00	X						0.	0.	0.
(24) DERALD WALKER BOARD MEMBER	5.00	X						0.	0.	0.
(25) GERALD HULSMAN BOARD MEMBER	5.00	X						0.	0.	0.
(26) GERRI KARETSKY BOARD MEMBER	5.00	X						0.	0.	0.
<b>1b Subtotal</b>								1,404,657.	0.	182,324.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,404,657.	0.	182,324.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **8**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PORTLAND' 5, MERC UNIT 14, PO BOX 5000, PORTLAND, OR 97208	ARLENE SCHNITZER CONCERT HALL	597,052.
1547 CSR - PITTOCK BLOCK LLC, 921 SW WASHINGTON STE 100, PORTLAND, OR 97205	OFFICE LEASE	262,188.
DOCUMART COPIES & PRINTING 3310 NW YEON, PORTLAND, OR 97210	PRINTING COMPANY	238,532.
THE AV DEPARTMENT LLC PO BOX 12697, PORTLAND, OR 97212	LIVESTREAM TECHNICIAN	146,044.
SELDY CRAMER INC 200 LAKESIDE DR #802, OAKLAND, CA 94610	ARTIST AGENT	142,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **9**

SEE PART VII, SECTION A CONTINUATION SHEETS

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(27) GRADY JURRENS BOARD MEMBER	5.00	X						0.	0.	0.
(28) IDA RAE CAHANA BOARD MEMBER	5.00	X						0.	0.	0.
(29) J. CLAYTON HERING BOARD MEMBER	5.00	X						0.	0.	0.
(30) JANET BLOUNT BOARD MEMBER	5.00	X						0.	0.	0.
(31) JEFF HEATHERINGTON BOARD MEMBER	5.00	X						0.	0.	0.
(32) JOANN YOUNG BOARD MEMBER	5.00	X						0.	0.	0.
(33) JUDY HUMMELT BOARD MEMBER	5.00	X						0.	0.	0.
(34) KRIS KERN BOARD MEMBER	5.00	X						0.	0.	0.
(35) LANE SHETTERLY BOARD MEMBER	5.00	X						0.	0.	0.
(36) LAUREN FOX BOARD MEMBER	5.00	X						0.	0.	0.
(37) MATT EDLEN BOARD MEMBER	5.00	X						0.	0.	0.
(38) MICHELE MASS BOARD MEMBER	5.00	X						0.	0.	0.
(39) MJ STEEN BOARD MEMBER	5.00	X						0.	0.	0.
(40) NANCY HALES BOARD MEMBER	5.00	X						0.	0.	0.
(41) PEGGY MILLER BOARD MEMBER	5.00	X						0.	0.	0.
(42) PRISCILLA LONGFIELD BOARD MEMBER	5.00	X						0.	0.	0.
(43) RENEE HOLZMAN BOARD MEMBER	5.00	X						0.	0.	0.
(44) ROBERT HALEY BOARD MEMBER	5.00	X						0.	0.	0.
(45) ROBERT HARRISON BOARD MEMBER	5.00	X						0.	0.	0.
(46) ROBYN GASTINEAU BOARD MEMBER	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										



**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>						
	<b>c</b> Fundraising events	<b>1c</b>	1,435,864.					
	<b>d</b> Related organizations	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>	8,164,962.					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	7,070,168.					
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 85,746.					
	<b>h Total.</b> Add lines 1a-1f							16670994.
Program Service Revenue	<b>2 a</b> <u>CONCERT TICKET &amp; FEES</u>	<b>Business Code</b>	711130	9,057,332.	9,057,332.			
	<b>b</b>							
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b> All other program service revenue							
	<b>g Total.</b> Add lines 2a-2f				9,057,332.			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			195,016.			195,016.	
	<b>4</b> Income from investment of tax-exempt bond proceeds							
	<b>5</b> Royalties							
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real					
			(ii) Personal					
	<b>b</b> Less: rental expenses	<b>6b</b>						
	<b>c</b> Rental income or (loss)	<b>6c</b>						
	<b>d</b> Net rental income or (loss)							
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities					
			(ii) Other					
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>	724,503.					
	<b>c</b> Gain or (loss)	<b>7c</b>	443,471.					
	<b>d</b> Net gain or (loss)		281,032.		281,032.		281,032.	
<b>8 a</b> Gross income from fundraising events (not including \$ 1,435,864. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>							
<b>b</b> Less: direct expenses	<b>8b</b>	156,750.						
<b>c</b> Net income or (loss) from fundraising events		231,035.		-74,285.		-74,285.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>							
<b>b</b> Less: direct expenses	<b>9b</b>							
<b>c</b> Net income or (loss) from gaming activities								
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>							
<b>b</b> Less: cost of goods sold	<b>10b</b>							
<b>c</b> Net income or (loss) from sales of inventory								
Miscellaneous Revenue	<b>11 a</b> <u>OTHER INCOME</u>	<b>Business Code</b>	90099	53,865.			53,865.	
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
	<b>e Total.</b> Add lines 11a-11d				53,865.			
<b>12 Total revenue.</b> See instructions				26183954.	9,057,332.	0.	455,628.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do 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 domestic organizations and domestic governments. See Part IV, line 21 ...	10,000.	10,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	811,534.	707,008.	53,809.	50,717.
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 .....	8,657,414.	7,427,290.	663,213.	566,911.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	387,848.	341,794.	21,528.	24,526.
9 Other employee benefits .....	1,691,569.	1,566,315.	46,981.	78,273.
10 Payroll taxes .....	996,498.	886,670.	46,267.	63,561.
11 Fees for services (nonemployees):				
a Management .....				
b Legal .....	480.		480.	
c Accounting .....	22,965.		22,965.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....	67,653.		67,653.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	741,802.	662,765.	30,008.	49,029.
12 Advertising and promotion .....	747,048.	714,200.	1,878.	30,970.
13 Office expenses .....	859,781.	548,515.	47,924.	263,342.
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....	920,596.	819,230.	36,150.	65,216.
17 Travel .....	102,421.	28,950.	11,667.	61,804.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings .....				
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	132,706.	53,082.	39,812.	39,812.
23 Insurance .....	24,442.		24,442.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <b>CONTRACT LABOR</b>	2,797,474.	2,687,454.	11,837.	98,183.
b <b>PRODUCTION EXPENSES</b>	1,686,058.	1,686,058.		
c _____				
d _____				
e All other expenses _____	281,779.	145,525.	71,477.	64,777.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>20,940,068.</b>	<b>18,284,856.</b>	<b>1,198,091.</b>	<b>1,457,121.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	6,231,149.	<b>1</b>	3,592,245.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	1,144,324.	<b>3</b>	2,036,846.
	<b>4</b> Accounts receivable, net .....	203,028.	<b>4</b>	1,538,014.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	458,726.	<b>9</b>	399,201.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 2,147,995.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,278,201.	719,050.	<b>10c</b> 869,794.
	<b>11</b> Investments - publicly traded securities .....	17,989,741.	<b>11</b>	19,048,770.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	994,533.	<b>12</b>	938,963.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	27,740,551.	<b>16</b>	28,423,833.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	625,776.	<b>17</b>	915,694.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	4,000,398.	<b>19</b>	3,587,254.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	1,996,798.	<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	12,432.	<b>25</b>	11,804.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	6,635,404.	<b>26</b>	4,514,752.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	5,399,972.	<b>27</b>	9,187,787.
	<b>28</b> Net assets with donor restrictions .....	15,705,175.	<b>28</b>	14,721,294.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	21,105,147.	<b>32</b>	23,909,081.
	<b>33</b> Total liabilities and net assets/fund balances .....	27,740,551.	<b>33</b>	28,423,833.

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,183,954.
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,940,068.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,243,886.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	21,105,147.
5	Net unrealized gains (losses) on investments	5	-2,439,952.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	23,909,081.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 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? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
1		
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2021)





**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	14683486.	11488429.	6446767.	13053221.	16670994.	62342897.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	14683486.	11488429.	6446767.	13053221.	16670994.	62342897.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						7683764.
<b>6 Public support.</b> Subtract line 5 from line 4.						54659133.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	14683486.	11488429.	6446767.	13053221.	16670994.	62342897.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	101,607.	189,131.	148,804.	64,778.	195,016.	699,336.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	288,045.	302,694.	73,579.	102,579.	53,865.	820,762.
<b>11 Total support.</b> Add lines 7 through 10						63862995.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	35,878,042.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	85.59 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	82.99 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** 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% support tests - 2020.** 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 Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). See instructions.  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2021 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2021</b>	<b>(iii) Distributable Amount for 2021</b>
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			



**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

OREGON SYMPHONY ASSOCIATION

Employer identification number

93-0446527

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).



Name of organization  <b>OREGON SYMPHONY ASSOCIATION</b>	Employer identification number  <b>93-0446527</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>6,460,832.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>1,459,430.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>1,175,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>501,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	<hr/> <hr/> <hr/>	\$ <u>400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>OREGON SYMPHONY ASSOCIATION</b>	Employer identification number  <b>93-0446527</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization  <b>OREGON SYMPHONY ASSOCIATION</b>	Employer identification number  <b>93-0446527</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization OREGON SYMPHONY ASSOCIATION Employer identification number 93-0446527

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make 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 program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 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 Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on 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 the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	17,885,630.	10,858,263.	11,527,523.	11,472,533.	10,119,898.
b Contributions	2,435.	3,695,895.	4,315.	2,981.	1,005,864.
c Net investment earnings, gains, and losses	-1,264,920.	4,012,340.	-326.	721,263.	990,031.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,023,343.	680,868.	673,249.	669,254.	643,260.
f Administrative expenses					
g End of year balance	15,599,802.	17,885,630.	10,858,263.	11,527,523.	11,472,533.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  17.7690 %
  - b Permanent endowment  61.8980 %
  - c Term endowment  20.3330 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No |
|---|-----|----|
| (i) Unrelated organizations   | X   |    |
| (ii) Related organizations  |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b  |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		711,895.	459,558.	252,337.
e Other		1,436,100.	818,643.	617,457.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				869,794.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY	11,804.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	11,804.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4:**

THE ORGANIZATION'S POLICY IS TO REALIZE A 6% DISTRIBUTION FROM THE ENDOWMENT FUNDS AVERAGE FAIR VALUE OVER THE PRIOR 13 QUARTERS THROUGH THE YEAR-END PRECEEDING THE FISCAL YEAR IN WHICH THE DISTRIBUTION IS PLANNED. DISTRIBUTIONS ARE USED TO FUND PROGRAMS IN THE AREAS FOR WHICH THE ENDOWMENTS WERE ESTABLISHED.

**PART X, LINE 2:**

THE ORGANIZATIONS FOLLOW THE PROVISIONS OF FASB ASC 740 TOPIC ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY

**Part XIII** Supplemental Information *(continued)*

WITH PROVISIONS OF THIS TOPIC.

Multiple horizontal lines for supplemental information.





**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SPRING GALA (event type)	OPENING (event type)	NONE (total number)	
Revenue	1	Gross receipts	1,546,214.	46,400.	1,592,614.
	2	Less: Contributions	1,389,464.	46,400.	1,435,864.
	3	Gross income (line 1 minus line 2)	156,750.		156,750.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	10,336.	1,500.	11,836.
	7	Food and beverages	130,596.	30,568.	161,164.
	8	Entertainment	44,933.		44,933.
	9	Other direct expenses	13,102.		13,102.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			231,035.
11	Net income summary. Subtract line 10 from line 3, column (d)			-74,285.	

**Part III Gaming.** Complete if the organization answered "Yes" on 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	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_





**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **OREGON SYMPHONY ASSOCIATION** Employer identification number **93-0446527**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
PORTLAND YOUTH PHILHARMONIC 9320 SW BARBUR BLVD, STE 140 PORTLAND, OR 97219	93-0386902	501(C)(3)	10,000.	0.			2022 WONDER AWARD

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 1

**3** Enter total number of other organizations listed in the line 1 table ▶ 0

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

Schedule I (Form 990) 2021



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization

**OREGON SYMPHONY ASSOCIATION**

Employer identification number

**93-0446527**

**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 on 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 checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input checked="" type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)          |

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

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

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- 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.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

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

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>	X	
<b>2</b>		X
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2021

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SCOTT SHOWALTER PRESIDENT/CEO	(i)	320,712.	50,000.	0.	14,500.	8,786.	393,998.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RUSSELL KELBAN VP MARKETING & STRATEGIC ENGAGEMENT	(i)	155,717.	0.	0.	3,472.	7,302.	166,491.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**PART I, LINE 1A:**

**A. SCOTT SHOWALTER, PRESIDENT & CEO. PAYMENT FOR BUSINESS USE OF HIS RESIDENCE FOR POST**

**CONCERT RECEPTIONS AND DONOR DINNERS. THIS IS PAID AS TAXABLE COMPENSATION.**

**B. DAVID DANZMAYR, MUSIC DIRECTOR. HOUSING ALLOWANCE PAID MONTHLY AS TAXABLE**

**COMPENSATION.**

**PART I, LINE 1B:**

**BOTH ARRANGEMENTS ABOVE ARE INCLUDED IN THE EMPLOYMENT CONTRACTS OF THE STATED EMPLOYEES. THESE ARE SIGNED BY THE BOARD OF DIRECTORS.**

**PART I, LINE 7:**

**THE CEO, SCOTT SHOWALTER WAS GIVEN A DISCRETIONARY BONUS OF \$50K (ALLOWED FOR IN THE EMPLOYMENT CONTRACT) IN DECEMBER 2022.**



**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
PINK MARTINI	BAND FOUNDER IS A B	180,000.	GUEST ARTIS		X

**Part V Supplemental Information.**

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: PINK MARTINI

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BAND FOUNDER IS A BOARD MEMBER

(D) DESCRIPTION OF TRANSACTION: GUEST ARTIST FEES

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **OREGON SYMPHONY ASSOCIATION** Employer identification number **93-0446527**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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				
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( <u>SUPPLIES</u> )	X	11	50,506.	PURCHASE PRICE
26 Other ( <u>EVENT ITEMS</u> )	X	4	35,240.	PURCHASE PRICE
27 Other ( _____ )				
28 Other ( _____ )				

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

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

**Part II**

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

OREGON SYMPHONY ASSOCIATION

Employer identification number

93-0446527

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EXPERIENCES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STRONGER COMMUNITY.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

IN HIS FIRST FULL SEASON AS JEAN VOLLUM MUSIC DIRECTOR, DAVID DANZMAYR  
LED THE ORCHESTRA'S TRIUMPHANT RETURN TO THE STAGE, FITTINGLY BEGINNING  
WITH MAHLER'S "RESURRECTION" SYMPHONY AND CONCLUDING WITH BEETHOVEN'S  
"ODE TO JOY." IN BETWEEN, OUR CLASSICAL SERIES FEATURED AN ARTIST OF  
COLOR OR A FEMALE ARTIST ON EVERY PROGRAM AS COMPOSER, CONDUCTOR,  
AND/OR FEATURED SOLOIST, A RARE FEAT AS BOTH WOMEN AND ARTISTS OF COLOR  
REMAIN UNDERREPRESENTED IN THE FIELD.

WE BROUGHT NEW WORKS TO LIFE THAT ENRICH THE ORCHESTRAL CANON,  
PARTICULARLY IN CONJUNCTION WITH THE ARTISTS OF OUR CREATIVE ALLIANCE.  
ARTIST-IN-RESIDENCE JOHANNES MOSER PREMIERED A CELLO CONCERTO FROM  
COMPOSER ROBIN HOLLOWAY, AND WE PREMIERED AN ORCHESTRAL ARRANGEMENT OF  
NATHALIE JOACHIM'S SUITE FROM FANM D'AYITI BASED ON THE MUSIC OF HER  
HAITIAN HERITAGE. TWO CO-COMMISSIONED PIECES ALSO CAME TO LIFE THIS  
SPRING: CREATIVE CHAIR GABRIEL KAHANE DEBUTED HIS PIANO CONCERTO WITH  
HIS FATHER, JEFFREY KAHANE, AS SOLOIST, AND OUR OWN JTTIK CLARK  
PERFORMED A NEW TUBA CONCERTO BY THE WORLD-RENOWNED WYNTON MARSALIS.  
BEYOND OUR CLASSICAL PROGRAMS, OUR POPS, POPCORN, AND SPECIALS SERIES

TREATED AUDIENCES TO A WIDE DIVERSITY OF GENRES INCLUDING ROCK, INDIE,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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FILM SCORES, RAP, R&B, AFRO-CUBAN JAZZ, AND MORE. ARTISTS FROM GLADYS KNIGHT TO THE MAMBO KINGS, LESLIE ODOM JR. TO BEN FOLDS, AND THE JAZZ AT LINCOLN CENTER ORCHESTRA TO THE MEXICAN FOLK-INSPIRED MUSIC OF BELOVED PIXAR FILM COCO BROUGHT A RICH TAPESTRY OF MUSICAL TRADITIONS TO OUR STAGE. WE ALSO INVESTED IN OREGON ARTISTS, WITH FEATURED SOLOS FROM SYMPHONY MUSICIANS SARAH KWAK (CONCERTMASTER), MARTIN HEBERT (OBOE), AND MICHAEL ROBERTS (PERCUSSION), ALONGSIDE WORKS FROM PORTLAND-BASED COMPOSERS KENJI BUNCH AND ANDY AKIHO. IN MAY, TOGETHER WITH RESONANCE ENSEMBLE, WE GAVE THE WORLD PREMIERE OF AN AFRICAN AMERICAN REQUIEM, A 20-MOVEMENT PIECE FOR ORCHESTRA, CHOIR, AND SOLOISTS, BY PORTLAND COMPOSER DAMIEN GETER. THIS WORK HONORS VICTIMS OF RACIAL VIOLENCE THROUGH CENTURIES, FROM PAST LYNCHINGS TO PRESENT-DAY DEATHS BY POLICE VIOLENCE. GETER'S REQUIEM INTEGRATES THE TRADITIONAL LATIN REQUIEM TEXT WITH CONTEMPORARY TEXTS, DRAWING UPON THE CLASSICAL, JAZZ, AND GOSPEL TRADITIONS AND INCORPORATING LYRICS FROM AFRICAN AMERICAN SPIRITUALS, CIVIL RIGHTS ACTIVISTS, AND POETS. A GROUP OF AFRICAN AMERICAN COMMUNITY LEADERS, INCLUDING BOARD MEMBER CHABRE VICKERS, HELPED THE SYMPHONY TO DESIGN OPPORTUNITIES FOR POST-CONCERT REFLECTION IN THE CONCERT HALL. LOCAL ORGANIZATIONS ALSO JOINED US IN THE LOBBY TO SHARE RESOURCES SUPPORTING THE BLACK COMMUNITY IN PORTLAND.

THE REQUIEM HAS ALREADY HAD DEEP IMPACT BOTH LOCALLY AND NATIONWIDE. THE PIECE WAS THE CAPSTONE OF A CIVIL RIGHTS CURRICULUM DEVELOPED IN PARTNERSHIP WITH RESONANCE ENSEMBLE AND PORTLAND PUBLIC SCHOOLS. PPS STUDENTS LEARNED ABOUT THE HISTORY OF RACIAL VIOLENCE IN PORTLAND AND THROUGHOUT AMERICA, STUDIED THE REQUIEM, ATTENDED THE CONCERT FOR FREE, AND AFTERWARD DISCUSSED IT AND THEIR RESPONSES IN STRUCTURED DIALOG.

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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THE PREMIERE REACHED A NATIONAL AUDIENCE THANKS TO LIVE RADIO BROADCAST ON ALL CLASSICAL PORTLAND AND WQXR IN NEW YORK. MANY RADIO STATIONS AROUND THE COUNTRY RE-AIRED OUR BROADCAST AS PART OF THEIR JUNETEENTH CELEBRATIONS, AND THE PIECE HAS ALREADY BEEN PERFORMED BY OTHER ORCHESTRAS, INCLUDING AT THE KENNEDY CENTER IN WASHINGTON, D.C.

WE EMBRACED NEW CONCERT FORMATS, INNOVATING BY ALIGNING WITH THE EVOLVING TASTES OF A YOUNGER MARKET, REMAINING CULTURALLY RELEVANT, AND REACHING OUTSIDE OF DOWNTOWN PORTLAND. GABRIEL KAHANE CURATED TWO ORIGINAL PERFORMANCES AT THE NEW RESER CENTER FOR THE ARTS. HE ALSO HOSTED OUR NEW OPEN MUSIC SERIES, WHICH EXPLORED THE CREATIVE PROCESSES OF THREE COMPOSERS ON THE SEASON: KENJI BUNCH, MISSY MAZZOLI, AND NATHALIE JOACHIM. THESE CONCERTS FEATURED CHAMBER ENSEMBLES THAT ALLOWED US TO DEPLOY OUR MUSICIANS IN DIFFERENT COMBINATIONS AND IN MORE INTIMATE VENUES LIKE REVOLUTION HALL, MISSISSIPPI STUDIOS, AND ALBERTA ROSE THEATER. WE ALSO LAUNCHED OUR FIRST LIVESTREAM SERIES OF SIX CONCERTS, AN EFFORT TO EXPAND MUSIC ACCESS. PEOPLE UNABLE TO COME TO THE HALL DUE TO PHYSICAL, GEOGRAPHICAL, OR ECONOMIC BARRIERS CAN NOW ACCESS OREGON SYMPHONY PERFORMANCES FROM THEIR HOMES.

WE EXPERIMENTED WITH NEW SUBJECT MATTER, IN KEEPING WITH OUR COMMITMENT TO EXPLORE TIMELY SOCIETAL THEMES THROUGH MUSIC. WE ADAPTED TAYLOR MAC'S PULITZER-NOMINATED A 24-DECADE HISTORY OF POPULAR MUSIC FOR ITS FIRST ORCHESTRAL STAGING. THIS BOLD WORK FOCUSES ON HISTORICALLY MARGINALIZED COMMUNITIES WHILE POKING FUN AT THE PATRIARCHAL, HOMOPHOBIC, AND RACIST SYSTEMS THAT OPPRESSED THEM. INDIE ARTIST KISHI BASHI JOINED US TO PERFORM IMPROVISATIONS ON EO9066, HIS VISUALLY STUNNING MULTIMEDIA PIECE EXPLORING THE IMPACT OF THE JAPANESE



Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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INTERNMENT ORDER DURING WWII. 2022 MARKED THE 80TH ANNIVERSARY OF EXECUTIVE ORDER 9066, AN ACTION THAT DEEPLY AFFECTED OREGON'S JAPANESE-AMERICAN COMMUNITY IN WAYS THAT ARE STILL FELT TODAY.

IN ADDITION TO PROGRAMMING WORKS FROM UNDERREPRESENTED COMPOSERS, WE ALSO INVESTED IN A MORE EQUITABLE FUTURE FOR CLASSICAL MUSIC. IN APRIL, WE HOSTED EARSHOT, A PROGRAM OF THE AMERICAN COMPOSER'S ORCHESTRA THAT SUPPORTS YOUNG COMPOSERS BY GIVING THEM AN OPPORTUNITY TO HAVE THEIR WORKS REHEARSED BY A PROFESSIONAL ENSEMBLE. WE HOSTED FOUR YOUNG LATINX COMPOSERS TWO MEN AND TWO WOMEN WHO HAD THEIR PIECES READ BY THE ORCHESTRA, AND WORKED WITH MENTOR COMPOSERS KENJI BUNCH, ANDY AKIHO, AND ANDREIA PINTO-CORREIA TO FURTHER DEVELOP THEIR COMPOSITIONS.

ORCHESTRA REHEARSAL TIME IS EXCEEDINGLY RARE, ESPECIALLY FOR YOUNG COMPOSERS, AND BY PARTICIPATING IN PROGRAMS LIKE EARSHOT WE INVEST IN THE DEVELOPMENT OF DIVERSE VOICES THAT WILL FILL ORCHESTRA HALLS IN THE YEARS TO COME. ADDITIONAL WORK AT A SYSTEMIC LEVEL TO SUPPORT EQUITY IN OUR INDUSTRY INCLUDES OUR PARTNERSHIPS WITH THE NATIONAL ALLIANCE FOR AUDITION SUPPORT THAT HELPS BLACK AND LATINX ARTISTS AFFORD TO TRAVEL FOR AUDITIONS, AND THE SPHINX QUALIFIED ARTISTS PROGRAM THAT IDENTIFIES UNDERREPRESENTED ARTISTS FOR SUBSTITUTE AND AUDITION OPPORTUNITIES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THEIR PRESENCE IN OUR COMMUNITY ENABLES A RICH ECOSYSTEM OF ARTISTIC OPPORTUNITIES THAT SHARE THE POWER OF MUSIC TO EDUCATE, INSPIRE, UNITE, AND HEAL.

AS SCHOOLS LIMITED FIELD TRIPS, WE ADAPTED OUR SIGNATURE YOUTH PROGRAMS FOR USE IN THE CLASSROOM. WE PRODUCED A DIGITAL VERSION OF OUR YOUNG

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PEOPLE'S CONCERT, WHICH WE SHARED FOR FREE ON OUR WEBSITE IN MAY AND DISTRIBUTED IN PARTNERSHIP WITH MUSIC WORKSHOP, A NONPROFIT THAT SHARES MUSIC EDUCATION VIDEOS WITH TEACHERS AROUND THE WORLD. CALLED SINFNICA!, THESE FOUR 20-MINUTE EPISODES ARE FULLY BILINGUAL AND TAKE STUDENTS ON A JOURNEY ACROSS LATIN AMERICA AND THE CARIBBEAN. WE ALSO DISSEMINATED THE VIDEOS DIRECTLY TO MORE THAN 50 SCHOOL DISTRICT PARTNERS THROUGHOUT OREGON AND SW WASHINGTON FOR USE IN CLASSROOMS. WE PROVIDED CARNEGIE HALL'S LINK UP CURRICULUM TO 28 SCHOOL PARTNERS THROUGHOUT AND BEYOND METRO PORTLAND. STUDENTS IN GRADES 3-5 LEARNED TO SING SONGS AND PLAY THE RECORDER THROUGHOUT THE YEAR, CULMINATING IN A PRE-RECORDED VERSION OF THE FINAL CONCERT WHICH ALLOWED THEM TO PLAY ALONG WITH A FULL ORCHESTRA. FINALLY, A THIRD SEASON OF SYMPHONY STORYTIME HAS FINISHED PRODUCTION AND NEW EPISODES IN ENGLISH AND SPANISH ARE BEING RELEASED THROUGHOUT AUGUST AND SEPTEMBER, JUST IN TIME FOR TEACHERS TO INCORPORATE THEM INTO THEIR SCHOOL YEAR CURRICULA FOR 22/23.

MUSIC IS AN ESSENTIAL PART OF A THRIVING COMMUNITY, AND WE WERE PROUD TO OFFER THREE FREE, LARGE-SCALE CONCERTS THROUGHOUT THE YEAR SERVING TENS OF THOUSANDS OF PEOPLE. PARTICULARLY DURING SUCH POLITICALLY FRAUGHT TIMES, MUSIC CREATES SPACE FOR PEOPLE OF ALL BACKGROUNDS TO EXPERIENCE ART TOGETHER AND BEGIN TO HEAL FROM THE MANY CHALLENGES FACING OUR COMMUNITY. THE WATERFRONT CONCERT OVER LABOR DAY WAS OUR FIRST FULL PERFORMANCE IN 545 DAYS, AND A JOYFUL RETURN TO THE HEART OF DOWNTOWN. IN APRIL, MORE THAN 700 OF OUR COMMUNITY-BASED ARTS, EDUCATION, AND SOCIAL SERVICE PARTNERS FILLED THE CONCERT HALL DURING THE 125TH ANNIVERSARY CELEBRATION CONCERT, MADE POSSIBLE BY OUR GALA PATRONS. AND IN MAY, WE WERE PROUD TO PERFORM THE ROSE CITY REUNION

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CONCERT AS PART OF PORTLAND'S ICONIC ROSE FESTIVAL. AS OREGON'S LARGEST AND MOST VISIBLE MUSIC ORGANIZATION, WE ARE COMMITTED TO HELPING LEAD THE CULTURAL, SOCIAL, SPIRITUAL, AND ECONOMIC LIFE OF OUR REGION.

WITH THE RETURN OF LIVE PERFORMANCE IN OUR CONCERT HALL, WE WERE PLEASED TO WELCOME BACK BOTH PRELUDE PERFORMANCES AND ORCHESTRA REHEARSAL VISITS FOR STUDENTS. THESE OPPORTUNITIES ARE AN IMPORTANT WAY THAT YOUNG MUSICIANS CAN SEE PERFORMANCES WITH NO FINANCIAL BARRIERS TO ENTRY. WE ALSO ARRANGED FOR STUDENT GROUPS TO VISIT WITH WORLD CLASS ARTISTS LIKE VIOLINIST JOSHUA BELL, AND THE JAZZ AT LINCOLN CENTER ORCHESTRA FEATURING WYNTON MARSALIS. IN A TYPICAL YEAR, ROUGHLY 1,000 STUDENTS ACCESS THESE INSPIRING OPPORTUNITIES, MANY OF WHOM WOULD BE OTHERWISE UNABLE TO ATTEND A SYMPHONY CONCERT. COMBINED WITH OUR ARTS FOR ALL \$5 TICKETS FOR EBT CARDHOLDERS, DEEPLY DISCOUNTED STUDENT TICKETS, AND FREE RADIO BROADCASTS ON ALL CLASSICAL AND AMERICAN PUBLIC MEDIA THAT REACH MORE THAN 20 MILLION LISTENERS WORLDWIDE, WE ARE REMOVING BARRIERS TO ALLOW ALL PEOPLE TO ACCESS GREAT ART. WE UNDERTOOK A FIFTH YEAR OF THE LULLABY PROJECT IN PARTNERSHIP WITH PORTLAND HOMELESS FAMILY SOLUTIONS. THEIR COVID PROTOCOLS PREVENTED OUR TYPICAL LARGE GROUP GATHERING FOR SONGWRITING, SO INSTEAD OUR SINGER-SONGWRITERS WORKED ONE-ON-ONE WITH FAMILIES LIVING AT PHFS TO WRITE THEIR PIECES TOGETHER. THE LULLABY PROJECT CELEBRATION CONCERT, DURING WHICH THE FAMILIES, SINGER-SONGWRITERS, AND OREGON SYMPHONY MUSICIANS WILL SHARE THE LULLABIES WITH THE PUBLIC, WILL TAKE PLACE IN SEPTEMBER AT LENTS PARK NEAR THE PHFS FAMILY VILLAGE IN EAST PORTLAND. EACH FAMILY WILL RECEIVE A PROFESSIONAL-QUALITY RECORDING OF ALL THE LULLABIES FROM THE YEAR, ALLOWING THEM TO LISTEN TO AND SING THEM FOR YEARS TO COME. IN THIS WAY, THE PROJECT IS FULFILLING ITS GOALS TO

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STRENGTHEN FAMILY BONDS AND IMPROVE HEALTH OUTCOMES FOR FAMILIES  
EXPERIENCING HOMELESSNESS.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE IS AUTHORIZED TO ACT ON BEHALF OF THE BOARD DURING  
THE INTERVALS BETWEEN FULL BOARD MEETINGS. THE EXECUTIVE COMMITTEE  
POSSESSES THE FULL POWER OF THE BOARD.

FORM 990, PART VI, SECTION A, LINE 2:

THOMAS LAUDERDALE, BOARD MEMBER, IS FOUNDER/OWNER OF PINK MARTINI, A  
PERFORMING GROUP THAT WORKS OFTEN WITH THE OREGON SYMPHONY.

FORM 990, PART VI, SECTION A, LINE 3:

THE EXECUTIVE COMMITTEE IS AUTHORIZED TO ACT ON BEHALF OF THE BOARD DURING  
THE INTERVALS BETWEEN FULL BOARD MEETINGS. THE EXECUTIVE COMMITTEE  
POSSESSES THE FULL POWER OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 WILL BE REVIEWED BY THE FINANCE COMMITTEES PRIOR TO SUBMISSION TO  
THE IRS. THE FULL BOARD WILL RECEIVE AN ELECTRONIC COPY OF THE FULL FORM  
PRIOR TO SUBMISSION.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS CONSISTENTLY MONITORS ANY POSSIBILITY OF A CONFLICT  
OF INTEREST. BOARD MEMBERS HAVE RECUSED THEMSELVES FROM VOTING ON POLICIES  
THAT MIGHT AFFECT THEM: FOR EXAMPLE, IF THE BOARD IS VOTING ON A MOTION  
THAT WILL INCREASE MUSICIAN COMPENSATION, DIRECTORS WHO ARE ALSO EMPLOYED  
BY THE SYMPHONY AS MUSICIANS IN THE ORCHESTRA HAVE CITED A CONFLICT OF

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INTEREST AND RECUSED THEMSELVES FROM VOTING ON THE MOTION.

FORM 990, PART VI, SECTION B, LINE 15:

FOR KEY EMPLOYEES OF THE ORGANIZATION, SPECIFICALLY THE CEO AND MUSIC DIRECTOR, MULTIYEAR EMPLOYMENT CONTRACTS ARE SIGNED. THESE CONTRACTS ARE PREPARED USING COMPARABILITY DATA BASED ON INFORMATION FROM THE SEARCH FIRM (FOR NEW HIRES) AND INDUSTRY REPORTS SUCH AS THE LEAGUE OF AMERICAN ORCHESTRAS ANNUAL WAGE SURVEYS. AT THE TIME OF PREPARATION, AN ADHOC COMPENSATION COMMITTEE FROM THE INDEPENDENT BOARD IS CREATED. EACH CONTRACT IS REVIEWED ON AN ANNUAL BASIS BY THE EXECUTIVE COMMITTEE. THE PROCESS IS SUBSTANTIATED THROUGH THE ACCEPTANCE OF THE ANNUAL BUDGET BY THE BOARD AND THE COMMITTEES.

FORM 990, PART VI, SECTION C, LINE 18:

FORM 990 IS AVAILABLE ON THE WEBSITE ORSYMPHONY.ORG AND IS UPLOADED TO GUIDESTAR. COPIES ARE ALSO AVAILABLE UPON REQUEST.

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 REQUEST. FINANCIAL STATEMENTS ARE ALSO PUBLISHED ON THE ORGANIZATION'S WEBSITE.

FORM 990, PART XII, LINE 2C:

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

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

(a) Name, address, and EIN (if applicable) 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.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
OREGON SYMPHONY FOUNDATION - 93-1225609 921 SW WASHINGTON, SUITE 200 PORTLAND, OR 97205	SUPPORT OF THE OREGON SYMPHONY ASSOCIATION	OREGON	501(C)(3)	LINE 12A, I	OREGON SYMPHONY ASSOCIATION	X	
OREGON SYMPHONY ASSOCIATION IN SALEM - 93-6031819, 921 SW WASHINGTON, SUITE 200, PORTLAND, OR 97205	BRING SYMPHONIC MUSIC AND THE OREGON SYMPHONY TO SALEM	OREGON	501(C)(3)	LINE 10	OREGON SYMPHONY ASSOCIATION	X	

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

Schedule R (Form 990) 2021

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

**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?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) OREGON SYMPHONY ASSOCIATION IN SALEM	L	240,000.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			





**Part VII** Supplemental Information

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

Multiple horizontal lines for providing supplemental information.