

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

Do not enter social security numbers on this form as it may be made public.

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

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable: <input checked="" 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	C Name of organization <p>OREGON SYMPHONY ASSOCIATION</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>851 SW 6TH AVE 385</p> City or town, state or province, country, and ZIP or foreign postal code <p>PORTLAND, OR 97204-1339</p> F Name and address of principal officer: ISAAC THOMPSON SAME AS C ABOVE	D Employer identification number <p>93-0446527</p> E Telephone number <p>503-228-4294</p> G Gross receipts \$ 24,545,936. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.ORSYMPHONY.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other L Year of formation: 1896 M State of legal domicile: OR		

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	45
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	40
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	412
	6 Total number of volunteers (estimate if necessary)	6	120
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 16,670,994.	Current Year 7,913,809.
	9 Program service revenue (Part VIII, line 2g)	9,057,332.	8,760,304.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	476,048.	209,610.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-20,420.	15,470.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,183,954.	16,899,193.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,000.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		12,544,863.	13,495,336.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)		1,667,425.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,385,205.	8,353,953.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	20,940,068.	21,859,289.	
19 Revenue less expenses. Subtract line 18 from line 12	5,243,886.	-4,960,096.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 28,423,833.	End of Year 25,268,377.
	21 Total liabilities (Part X, line 26)	4,514,752.	5,093,084.
	22 Net assets or fund balances. Subtract line 21 from line 20	23,909,081.	20,175,293.

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.

Sign Here	Signature of officer JANICE ROMANO, VP-FINANCE & ADMINISTRATION	Date	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name SANG AHN	Preparer's signature	Date
	Firm's name MCDONALD JACOBS, P.C.	Firm's EIN 93-0900579	Check if self-employed <input type="checkbox"/> PTIN P00540880
	Firm's address 121 SW SALMON ST., STE 1100 PORTLAND, OR 97204	Phone no. (503) 227-0581	

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:

SEE SCHEDULE O

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 \$ 18,570,698. including grants of \$ 10,000.) (Revenue \$ 8,760,304.)

THE 22/23 SEASON SAW THE OREGON SYMPHONY CONTINUE TO INVEST IN ITS MISSION BY BRINGING INSPIRING MUSIC TO LIFE ON THE STAGE, CHAMPIONING OREGON ARTISTS, GROWING THE ART FORM WITH NEW COMMISSIONS, DIVERSIFYING THE GENRES THAT WE PRESENT, AND SUPPORTING COMMUNITY WELLBEING THROUGH EDUCATION AND ENGAGEMENT PROGRAMS. AS THE LARGEST PERFORMING ARTS INSTITUTION IN THE LARGEST CITY IN OREGON, WE ARE COMMITTED TO OUR RESPONSIBILITY AS LEADERS IN THE CULTURAL AND ECONOMIC LIFE OF OUR REGION. FOR MORE THAN 110 NIGHTS OF THE YEAR, WE ARE HELPING REVITALIZE OUR URBAN CORES BY BRINGING PEOPLE INTO THE HEART OF PORTLAND AND SALEM NOT ONLY TO ENJOY GREAT ART, BUT ALSO TO SUPPORT DOWNTOWN BUSINESSES .

AT THIS MOMENT OF SOCIAL, POLITICAL, AND ECONOMIC UNCERTAINTY, OUR

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

ARTISTIC EXCELLENCE

UNDER JEAN VOLLUM MUSIC DIRECTOR DAVID DANZMAYR, WE CONTINUED OUR COMMITMENT TO VIBRANT AND DIVERSE ARTISTRY, INSPIRING AUDIENCES, AND EXAMINING TIMELY SUBJECTS THROUGH MUSIC. IN JANUARY, WE PRESENTED THE U.S. PREMIERE OF HUMAN ARCHIPELAGO BY INDIAN AMERICAN COMPOSER VIJAY IYER. THE PIECE, FEATURING CELLIST INBAL SEGEV, EXPLORES IMMIGRATION DUE TO CLIMATE DISASTERS. IYER DISRUPTS THE TRADITIONAL ORCHESTRA-SOLOIST RELATIONSHIP BY INTRODUCING A SMALL GROUP OF ORCHESTRAL PLAYERS CALLED "TRAVELERS" WHO ARE IN TENSION WITH THE GREATER ORCHESTRA, REQUIRING BOTH ELEMENTS TO FIND A WAY TO COEXIST MUSICALLY. WE ALSO GAVE THE WORLD PREMIERE OF OUR CO-COMMISSION, VIOLIN CONCERTO NO. 3, BY ESTONIAN COMPOSER ERKKI-SVEN TR. TR EXPLAINED THAT

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

INVESTING IN COMMUNITY

EQUALLY IMPORTANT TO OUR EXCELLENCE ONSTAGE IS THE WORK WE DO TO INCREASE ACCESS TO THE ARTS. MUSIC SUPPORTS COGNITIVE DEVELOPMENT, EMOTIONAL WELLBEING, AND SOCIAL INCLUSION. EACH YEAR, TENS OF THOUSANDS OF PEOPLE EXPERIENCE THESE BENEFITS THROUGH SYMPHONY PROGRAMS. FOLLOWING IS A SAMPLING OF THE MANY WAYS THAT OUR MUSICIANS AND VISITING ARTISTS BROUGHT THE LIFE-CHANGING BENEFITS OF MUSIC TO OUR COMMUNITY IN THE SECOND HALF OF FY23.

LED BY HAROLD & ARLENE SCHNITZER ASSOCIATE CONDUCTOR DEANNA THAM, WE HOSTED FIVE YOUNG PEOPLE'S CONCERTS THIS SPRING: TWO IN PORTLAND, TWO IN SALEM, AND ONE IN NEWBERG. COLLECTIVELY, 6,200+ STUDENTS IN GRADES

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 18,570,698.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefits, and controlled entities.

Note: All Form 990 filers are required to complete Schedule O

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, Question Text, Yes, No. Rows include questions 1a, 1b, and 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 columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 45		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 40		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
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.
 Own website Another's website 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
851 SW 6TH AVE STE 385, PORTLAND, OR 97204-1339

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, box 6 of 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				403,020.	0.	24,474.
(2) DAVID DANZMAYR MUSIC DIRECTOR	40.00				X			273,614.	0.	17,525.
(3) SARAH KWAK CONCERTMASTER	35.00				X			183,176.	0.	16,622.
(4) RUSSELL KELBAN VP MARKETING & STRATEGIC ENGAGEMENT	45.00				X			167,348.	0.	15,673.
(5) HILARY BLAKEMORE VP DEVELOPMENT	45.00				X			140,149.	0.	16,130.
(6) STEVE WENIG VP & GM	40.00 5.00				X			125,993.	0.	26,128.
(7) JANICE ROMANO VP FINANCE & ADMIN	40.00 5.00			X				128,306.	0.	16,381.
(8) ALICIA DIDONATO PAULSEN BOARD MEMBER/MUSICIAN	35.00	X						68,298.	0.	23,117.
(9) SERGIO CARRENO BOARD MEMBER/MUSICIAN	35.00	X						70,315.	0.	17,695.
(10) EMILY COLE BOARD MEMBER/MUSICIAN	35.00	X						55,638.	0.	12,006.
(11) DAN DRINKWARD CHAIR	20.00	X		X				0.	0.	0.
(12) COURTNEY ANGELI VICE CHAIR	20.00	X		X				0.	0.	0.
(13) EVE CALLAHAN SECRETARY	20.00	X		X				0.	0.	0.
(14) JACK WILBORN TREASURER	20.00	X		X				0.	0.	0.
(15) RICK HINKES BOARD MEMBER	5.00	X						0.	0.	0.
(16) TIGE HARRIS BOARD MEMBER	5.00	X						0.	0.	0.
(17) PATRICK CLARK BOARD MEMBER	5.00	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) BILL EARLY BOARD MEMBER	5.00	X						0.	0.	0.
(19) CHABRE VICKERS BOARD MEMBER	5.00	X						0.	0.	0.
(20) CLIFF DEVENNEY BOARD MEMBER	5.00	X						0.	0.	0.
(21) CAMERON HUNT BOARD MEMBER	5.00	X						0.	0.	0.
(22) DAN RASAY BOARD MEMBER	5.00	X						0.	0.	0.
(23) DERALD WALKER BOARD MEMBER	5.00	X						0.	0.	0.
(24) GERALD HULSMAN BOARD MEMBER	5.00	X						0.	0.	0.
(25) GERRI KARETSKY BOARD MEMBER	5.00	X						0.	0.	0.
(26) GRADY JURRENS BOARD MEMBER	5.00	X						0.	0.	0.
1b Subtotal								1,615,857.	0.	185,751.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,615,857.	0.	185,751.

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 18

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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>	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>		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 CENTERS FOR THE ARTS, MERC UNIT 14, PO BOX 5000, PORTLAND, OR 97208	ARLENE SCHNITZER CONCERT HALL	1,788,625.
1547 CSR - PITTOCK BLOCK LLC, 921 SW WASHINGTON STE 100, PORTLAND, OR 97205	OFFICE LEASE	352,156.
DOCUMART COPIES & PRINTING 3310 NW YEON, PORTLAND, OR 97210	PRINTING COMPANY	349,068.
CAPACITY INTERACTIVE CONSULTING, LLC PO BOX 50019, NEWARK, NJ 07101	ADVERTISING	286,743.
PINK MARTINI, INC. 728 SW 1ST AVE, PORTLAND, OR 97204	GUEST ARTIST	180,000.

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 15

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) IDA RAE CAHANA BOARD MEMBER	5.00	X						0.	0.	0.
(28) J. CLAYTON HERING BOARD MEMBER	5.00	X						0.	0.	0.
(29) JANET BLOUNT BOARD MEMBER	5.00	X						0.	0.	0.
(30) JEFF HEATHERINGTON BOARD MEMBER	5.00	X						0.	0.	0.
(31) EMILY KARR BOARD MEMBER	5.00	X						0.	0.	0.
(32) JUDY HUMMELT BOARD MEMBER	5.00	X						0.	0.	0.
(33) KRIS KERN BOARD MEMBER	5.00	X						0.	0.	0.
(34) JASON MATUSOW BOARD MEMBER	5.00	X						0.	0.	0.
(35) LAUREN FOX BOARD MEMBER	5.00	X						0.	0.	0.
(36) MATT EDLEN BOARD MEMBER	5.00	X						0.	0.	0.
(37) MICHELE MASS BOARD MEMBER	5.00	X						0.	0.	0.
(38) MJ STEEN BOARD MEMBER	5.00	X						0.	0.	0.
(39) KAIZAD MISTRY BOARD MEMBER	5.00	X						0.	0.	0.
(40) PEGGY MILLER BOARD MEMBER	5.00	X						0.	0.	0.
(41) PRISCILLA LONGFIELD BOARD MEMBER	5.00	X						0.	0.	0.
(42) RENEE HOLZMAN BOARD MEMBER	5.00	X						0.	0.	0.
(43) ROBERT HALEY BOARD MEMBER	5.00	X						0.	0.	0.
(44) ROBERT HARRISON BOARD MEMBER	5.00	X						0.	0.	0.
(45) ROBYN GASTINEAU BOARD MEMBER	5.00	X						0.	0.	0.
(46) ROSCOE NELSON BOARD MEMBER	5.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for THOMAS LAUDERDALE, WALT WEYLER, BONNIE REAGAN, MICHELLE WEISENBACH, and MARK WILLIAMS.

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	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	1,920,010.					
	d Related organizations	1d						
	e Government grants (contributions)	1e	695,546.					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	5,298,253.					
	g Noncash contributions included in lines 1a-1f	1g	\$ 72,908.					
	h Total. Add lines 1a-1f			7,913,809.				
Program Service Revenue	2 a CONCERT TICKET & FEES	Business Code	711130	8,760,304.	8,760,304.			
	b _____							
	c _____							
	d _____							
	e _____							
	f All other program service revenue							
	g Total. Add lines 2a-2f			8,760,304.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			255,417.			255,417.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real					
			(ii) Personal					
	b Less: rental expenses ...	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	7423540.				
			(ii) Other					
	b Less: cost or other basis and sales expenses	7b	7469347.					
	c Gain or (loss)	7c	-45,807.					
d Net gain or (loss)			-45,807.			-45,807.		
8 a Gross income from fundraising events (not including \$ 1,920,010. of contributions reported on line 1c). See Part IV, line 18	8a		152,100.					
b Less: direct expenses	8b		177,396.					
c Net income or (loss) from fundraising events				-25,296.		-25,296.		
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	900099	40,766.			40,766.	
	b _____							
	c _____							
	d All other revenue							
	e Total. Add lines 11a-11d			40,766.				
12 Total revenue. See instructions			16899193.	8,760,304.		0.	225,080.	

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	864,515.	745,607.	62,881.	56,027.
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	9,428,595.	8,013,630.	782,094.	632,871.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	460,662.	402,647.	30,516.	27,499.
9 Other employee benefits	1,720,179.	1,573,990.	55,579.	90,610.
10 Payroll taxes	1,021,385.	903,269.	50,523.	67,593.
11 Fees for services (nonemployees):				
a Management				
b Legal	13,385.		13,385.	
c Accounting	36,500.		36,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	77,772.		77,772.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	617,438.	441,875.	100,143.	75,420.
12 Advertising and promotion	982,379.	919,270.	620.	62,489.
13 Office expenses	799,216.	565,413.	57,479.	176,324.
14 Information technology				
15 Royalties				
16 Occupancy	963,621.	845,593.	38,488.	79,540.
17 Travel	144,521.	41,561.	34,489.	68,471.
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	190,417.	76,167.	57,125.	57,125.
23 Insurance	29,022.		29,022.	
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 CONTRACT LABOR	2,457,423.	2,203,965.	40,691.	212,767.
b PRODUCTION EXPENSES	1,695,705.	1,694,863.		842.
c _____				
d _____				
e All other expenses _____	346,554.	132,848.	153,859.	59,847.
25 Total functional expenses. Add lines 1 through 24e	21,859,289.	18,570,698.	1,621,166.	1,667,425.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <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
Assets	1 Cash - non-interest-bearing	3,592,245.	1	1,065,278.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,036,846.	3	1,765,711.
	4 Accounts receivable, net	1,538,014.	4	1,834,254.
	5 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	399,201.	9	385,698.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,318,986.		
	b Less: accumulated depreciation	10b 1,297,076.	869,794.	10c 1,021,910.
	11 Investments - publicly traded securities	19,048,770.	11	18,275,458.
	12 Investments - other securities. See Part IV, line 11	938,963.	12	743,631.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	0.	15	176,437.
16 Total assets. Add lines 1 through 15 (must equal line 33)	28,423,833.	16	25,268,377.	
Liabilities	17 Accounts payable and accrued expenses	915,694.	17	1,243,132.
	18 Grants payable		18	
	19 Deferred revenue	3,587,254.	19	3,657,684.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 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	11,804.	25	192,268.
	26 Total liabilities. Add lines 17 through 25	4,514,752.	26	5,093,084.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	9,187,787.	27	6,301,739.
	28 Net assets with donor restrictions	14,721,294.	28	13,873,554.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	23,909,081.	32	20,175,293.
33 Total liabilities and net assets/fund balances	28,423,833.	33	25,268,377.	

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	16,899,193.
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,859,289.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,960,096.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,909,081.
5	Net unrealized gains (losses) on investments	5	1,226,308.
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	20,175,293.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
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:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	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		

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 [] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 [] A school described in section 170(b)(1)(A)(ii).
3 [] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 [] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 [] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 [] A community trust described in section 170(b)(1)(A)(vi).
9 [] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 [] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 [] An organization organized and operated exclusively to test for public safety.
12 [] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a [] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b [] Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c [] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d [] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e [] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations []
g Provide the following information about the supported organization(s).

Table with 6 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11488429.	6446767.	13053221.	16670994.	7913809.	55573220.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	11488429.	6446767.	13053221.	16670994.	7913809.	55573220.
5 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)						6000672.
6 Public support. Subtract line 5 from line 4.						49572548.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	11488429.	6446767.	13053221.	16670994.	7913809.	55573220.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	189,131.	148,804.	64,778.	195,016.	255,417.	853,146.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	302,694.	73,579.	102,579.	53,865.	40,766.	573,483.
11 Total support. Add lines 7 through 10						56999849.
12 Gross receipts from related activities, etc. (see instructions)					12	34,480,501.
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	86.97 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	85.59 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

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

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2022. 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 - 2021. 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 on line 12 of 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
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c 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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c 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>		
10a 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 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	Adjusted Net Income (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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	Minimum Asset Amount (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	Distributable Amount. 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)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Part VI

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

Horizontal lines for supplemental information input.

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 for the latest information.

OMB No. 1545-0047

2022

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 OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
--	---

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
1	_____ _____ _____	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ 500,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ 233,333.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ 356,923.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ 560,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ 357,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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
7	<hr/> <hr/> <hr/>	\$ <u>281,852.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>215,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>345,151.</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.)
<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 OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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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
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____

Name of organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(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

2022

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.

	(a) Donor advised funds	(b) Funds and other accounts
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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

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) 2022

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	15,599,802.	17,885,630.	10,858,263.	11,527,523.	11,472,533.
b Contributions	359,496.	2,435.	3,695,895.	4,315.	2,981.
c Net investment earnings, gains, and losses	872,619.	-1,264,920.	4,012,340.	-326.	721,263.
d Grants or scholarships					
e Other expenditures for facilities and programs	740,186.	1,023,343.	680,868.	673,249.	669,254.
f Administrative expenses					
g End of year balance	16,091,731.	15,599,802.	17,885,630.	10,858,263.	11,527,523.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 18.1300 %
 - b Permanent endowment 62.0530 %
 - c Term endowment 19.8170 %
- 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		39,125.		39,125.
d Equipment		645,621.	373,559.	272,062.
e Other		1,634,240.	923,517.	710,723.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,021,910.

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)		
Total. (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)		
Total. (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)	
Total. (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	10,796.
(3) OPERATING LEASE LIABILITIES	181,472.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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.

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

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

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

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

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	2,014,360.	57,750.	2,072,110.
	2	Less: Contributions	1,862,260.	57,750.	1,920,010.
	3	Gross income (line 1 minus line 2)	152,100.		152,100.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	12,638.	5,000.	17,638.
	7	Food and beverages	128,708.	31,050.	159,758.
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			177,396.
11	Net income summary. Subtract line 10 from line 3, column (d)			-25,296.	

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 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

OREGON SYMPHONY ASSOCIATION

Part I General Information on Grants and Assistance

Employer identification number
93-0446527

- 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
OUTSIDE THE FRAME 800 NW 6TH AVE STE 335 PORTLAND, OR 97209	47-4159875	501(C)(3)	10,000.	0.			2023 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) 2022**

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

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
1b	X	
2		X
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2022

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) 403,020.	0.	0.	15,250.	9,224.	427,494.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID DANZMAYR MUSIC DIRECTOR	(i) 273,614.	0.	0.	0.	17,525.	291,139.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARAH KWAK CONCERTMASTER	(i) 183,176.	0.	0.	9,159.	7,463.	199,798.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RUSSELL KELBAN VP MARKETING & STRATEGIC ENGAGEMENT	(i) 167,348.	0.	0.	8,210.	7,463.	183,021.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(5) HILARY BLAKEMORE VP DEVELOPMENT	(i) 140,149.	0.	0.	6,906.	9,224.	156,279.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(6) STEVE WENIG VP & GM	(i) 125,993.	0.	0.	6,426.	19,702.	152,121.	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)							

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. AN ADDITIONAL BONUS OF \$50K WAS ACCRUED IN JUNE 2023 AND PAID IN SEPTEMBER 2023.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

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 (FOOD & BEVERAGE)	X	17	43,734.	PURCHASE PRICE
26 Other (EVENT ITEMS)	X	0	27,574.	PURCHASE PRICE
27 Other (TENT)	X	1	1,600.	PURCHASE PRICE
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 3 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 for the latest information.

OMB No. 1545-0047

2022

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:

THE OREGON SYMPHONY INSPIRES AUDIENCES AND BUILDS COMMUNITY BY CREATING
OUTSTANDING MUSICAL EXPERIENCES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION 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
STRONGER COMMUNITY.

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

COMMUNITY NEEDS MUSIC MORE THAN EVER TO EDUCATE, UNITE, INSPIRE, AND
HEAL. IN FY23, WE WERE PROUD TO MEET THAT NEED FOR THE NEARLY 350,000
CHILDREN AND ADULTS WHO EXPERIENCED THE OREGON SYMPHONY IN PERSON
THROUGH A PERFORMANCE OR COMMUNITY EVENT AND FOR THE 25 MILLION
GLOBALLY WHO HEARD US VIA BROADCAST. WHILE IT WAS A CHALLENGING YEAR
FOR THE ARTSPARTICULARLY SO IN PORTLANDWE ARE NEVERTHELESS ENCOURAGED.
TICKET SALES FOR OUR UPCOMING 23/24 SEASON ARE INCREASING
SIGNIFICANTLY, DATA INDICATE THAT PEOPLE ARE LISTENING TO ORCHESTRAL
MUSIC AT RECORD LEVELS, AND DOWNTOWN SAFETY APPEARS TO BE IMPROVING.

ALTHOUGH WE WILL CONTINUE TO FACE CHALLENGES AS THE ARTS SECTOR
RECOVERS, WE ARE ADDRESSING THEM PROACTIVELY AND WILL CONTINUE TO LEAD
THE WAY FOR THE ARTS IN OREGON. WHILE WE PREPARE FOR THAT FUTURE, WE
CONTINUE TO BRING THE POWER OF MUSIC TO MORE PEOPLE IN NEW WAYSBOTH

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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ONSTAGE AND OFF.

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

THE WORK, SUBTITLED CONVERSATIONS WITH THE UNKNOWN, REFERS TO "AN INDIVIDUAL TRYING TO FIND AN INNER HARMONY WITH HIS OTHER SELF, AN INNER VOICE (CONSCIENCE), GOD (IN THE ABSTRACT), OR WITH SOMEONE YOU DO NOT KNOW BUT WISH TO HAVE AS A CLOSE FRIEND." IT WAS WRITTEN FOR AND PERFORMED BY VIRTUOSO ISRAELI VIOLINIST VADIM GLUZMAN.

ADDITIONAL OUTSTANDING GUEST ARTISTS IN THE LATTER HALF OF OUR SEASON INCLUDED PIANISTS EMANUEL AX AND AARON DIEHL, VIOLINIST BLAKE POULIOT, ARTISTS-IN-RESIDENCE SIMONE LAMSMA (VIOLIN) AND XAVIER FOLEY (BASS), CREATIVE ALLIANCE MEMBER ANDY AKIHO, AND GLOBAL SUPERSTAR ITZHAK PERLMAN. WE FURTHER MADE INVESTMENTS IN LOCAL ARTISTS BY SHOWCASING OREGON SYMPHONY MUSICIANS. BRUCE & JUDY THESENGA PRINCIPAL FLUTE MARTHA LONG PERFORMED MOZART'S FLUTE CONCERTO IN G MAJOR. TRUMAN COLLINS, SR. PRINCIPAL SECOND VIOLIN CHIEN TAN PERFORMED ALONGSIDE XAVIER FOLEY IN BOTTESINI'S DOUBLE CONCERTO NO. 2. OUR "CONCERTO SPECTACULAR" FEATURED SOLO AND CHAMBER WORKS BY PRINCIPAL TRUMPET JEFF WORK; MR. & MRS. EDMUND HAYES, JR. PRINCIPAL CELLO NANCY IVES; PRINCIPAL CLARINET JAMES SHIELDS; AND THE ENTIRE PERCUSSION SECTION.

TO ADVANCE OUR GOAL TO REACH MORE PEOPLE IN NEW WAYS, WE EXPERIMENTED WITH CONCERT FORMATS TO INTEGRATE AUDIENCES WITH ARTISTS. HAITIAN AMERICAN NATHALIE JOACHIMA MEMBER OF OUR CREATIVE ALLIANCE, WHOSE DIVERSE COMPOSERS AND MUSICIANS BRING THEIR UNIQUE PERSPECTIVES TO CREATE PIONEERING WORKS AND COMPELLING COLLABORATIONS HOSTED A SECOND SEASON OF OPEN MUSIC . THESE INTIMATE EVENINGS COMBINED TALK AND

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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PERFORMANCE TO EXPLORE THE PROCESS OF COMPOSING FOR GUESTS VIJAY IYER, GABRIELA MONTERO, AND ANDY AKIHO. EACH GUEST CURATED A PROGRAM THAT SHOWCASED THEIR APPROACH TO COMPOSITION AND SOURCES OF INSPIRATION. CREATIVE CHAIR GABRIEL KAHANE ALSO CURATED TWO CHAMBER CONCERTS AT THE RESER CENTER FOCUSED ON NEW MUSIC FROM FEMALE COMPOSERS AND COMPOSERS OF COLOR, WHO ARE UNDERREPRESENTED IN THE CLASSICAL FIELD. THE FIRST CONCERT FEATURED THE BLUE HOUR, A SONG CYCLE WRITTEN COLLABORATIVELY BY COMPOSERS RACHEL GRIMES, ANGLICA NEGRN, SHARA NOVA, CAROLINE SHAW, AND SARAH KIRKLAND SNIDER THAT EXPLORES THE BEAUTY, PAIN, AND FRAGILITY OF LIFE FROM A FEMALE PERSPECTIVE. THE SECOND, ENTITLED THE LAW OF MOSAICS, BROUGHT TOGETHER FOUR CENTURIES OF MUSIC AND CONSIDERED THE WAYS IN WHICH ARTISTS, BY ENGAGING WITH EACH OTHER ACROSS TIME, HELP US TO BETTER UNDERSTAND OURSELVES AND THE WORLD. IT PAIRED HISTORICAL WORKS BY BACH, BEETHOVEN, MOZART AND FARRENC WITH CONTEMPORARY WORKS BY LIGETI, ANDREW NORMAN, JESSIE MONTGOMERY, AND TED HEARNE.

BEYOND THE CLASSICAL SERIES, WE STRETCHED ARTISTICALLY TO COVER A BREADTH OF GENRES. WE PRODUCED PROGRAMS WITH THE WORLD'S LEADING INDIAN TABLA PLAYER, ZAKIR HUSSAIN, AND HIS MASTERS OF PERCUSSION; DRAG PERFORMER THORGY THOR, WHO ROSE TO FAME ON "RUPAUL'S DRAG RACE"; THE MUSIC OF ROCK LEGEND LED ZEPPELIN; CLASSIC TELEVISION THEMES; MOVIE SCORES FROM FILMS LIKE "THE GOONIES" AND "WEST SIDE STORY"; AND VIDEO GAME MUSIC FROM FINAL FANTASY. OUR MUSIC FOR FAMILIES SERIESHOUR-LONG, MULTIMEDIA PERFORMANCES DESIGNED FOR YOUNG CHILDRENAGAIN PROVED POPULAR. WE EVEN ADDED AN EXTRA SHOW OF PETER & THE WOLF IN APRIL TO MEET DEMAND.

AS WE INVESTED IN LOCAL CLASSICAL ARTISTS, WE INVESTED IN LOCAL POPULAR

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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ARTISTS AS WELL. OVER THE YEARS, WE HAVE GIVEN ARTISTS LIKE PINK MARTINI, BLIND PILOT, STORM LARGE, AND TAYLOR MAC THEIR ORCHESTRAL DEBUTS, HELPING THEM TO REACH NEW AUDIENCES AND GROWING PORTLAND'S CULTURAL FOOTPRINT. THIS SEASON, WE BUILT ON THAT LEGACY BY GIVING ORCHESTRAL DEBUTS FOR RAPPER AMIN, PINK MARTINI'S CHINA FORBES, AND ALT-ROCK LEGENDS THE DANDY WARHOLS.

WE INVESTED IN ARTISTIC EXCELLENCE ONSTAGE WHILE NAVIGATING CHALLENGES WITH OUR CONCERT HALL. UNSAFE CONDITIONS RELATED TO INADEQUATE SNOW/ICE REMOVAL IN WINTER AND FAILED COOLING SYSTEMS IN THE SPRING IMPEDED OUR ABILITY TO HOST CONCERTS. THE SYMPHONY INCURRED TENS OF THOUSANDS OF DOLLARS IN EXTRA COSTS DUE TO THESE PROBLEMS; PRESIDENT SCOTT SHOWALTER PUBLICIZED ISSUES IN THE MEDIA TO APPLY PRESSURE TO LOCAL OFFICIALS TO REMEDY THEM. HE CONTINUES THAT CAMPAIGN ON BEHALF OF ALL NONPROFIT ARTS GROUPS, TESTIFYING IN SUMMER 2023 BEFORE METRO COUNCILORS AND MERC COMMISSIONERS ABOUT PROBLEMS WITH THE HALL'S MANAGEMENT AND THEIR HISTORIC COST INCREASES.

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

3-8 FROM SEVEN COUNTIES JOINED US FOR A YPC PERFORMANCE. STUDENTS ENJOYED A WIDE VARIETY OF WORKS, FROM CLASSICAL MASTERS LIKE BEETHOVEN, MUSSORGSKY, AND DEBUSSY TO LIVING COMPOSERS LIKE GABRIELA LENA FRANK, ANDY AKIHO, FRANK PROTO, AND 14-YEAR-OLD PORTLAND COMPOSER ELAINA RAE STUPLER.

IN MARCH, WE HOSTED THREE LINK UP CONCERTS IN PORTLAND FOR PARTICIPATING STUDENTS IN GRADES 3-5. DURING THE SCHOOL YEAR, STUDENTS LEARNED TO SING AND PLAY THE RECORDER IN THEIR CLASSROOMS; THE LINK UP

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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CURRICULUM CULMINATES WITH STUDENTS PERFORMING FROM THEIR SEATS IN OUR HALL ALONGSIDE THE OREGON SYMPHONY. THIS YEAR, MORE THAN 5,500 STUDENTS STUDIED IN OUR PROGRAM AND JOINED US IN THE HALL.

WE BROUGHT BACK OUR KINDERKONZERTS SERIES OF IN-SCHOOL PERFORMANCES FOR STUDENTS IN GRADES K-2. THREE HOST SCHOOLS FAUBION SCHOOL IN NE PORTLAND, WOODSTOCK ELEMENTARY IN SE PORTLAND, AND LINCOLN ST. SCHOOL IN HILLSBORO ENGAGED NEARLY 4,000 STUDENTS FOR UP-CLOSE PERFORMANCES BY GROUPS OF OREGON SYMPHONY MUSICIANS. EACH PERFORMANCE FEATURED AN ENSEMBLE OF STRING, WOODWIND, OR BRASS PLAYERS SHARING SHORT PIECES THAT DEMONSTRATED THE TONE QUALITY AND CHARACTERISTICS OF EACH INSTRUMENT. UNDER THE GUIDANCE OF A NARRATOR, STUDENTS WERE ENCOURAGED TO MOVE WITH THE MUSIC, RESPOND TO QUESTIONS, CLAP AND SING, AND ENGAGE VERBALLY THROUGHOUT EACH PERFORMANCE.

PRIOR TO EACH CLASSICAL CONCERT AND SELECT POPS AND SPECIALS CONCERTS DURING THE SEASON, WE HOSTED STUDENT ENSEMBLES IN OUR LOBBY TO GIVE PRELUDE PERFORMANCES. STUDENT PERFORMERS WERE RECOGNIZED FROM THE STAGE BEFORE EACH CONCERT, AND THEY WERE INVITED TO ATTEND THE SYMPHONY PERFORMANCE FREE OF CHARGE. MORE THAN 300 STUDENT MUSICIANS WERE AFFORDED THIS UNIQUE OPPORTUNITY. WE ALSO WELCOMED HUNDREDS OF STUDENTS TO WITNESS AND LEARN FROM ORCHESTRA REHEARSALS. ONE HIGH SCHOOL STUDENT REMARKED, "IT WAS EYE-OPENING TO SEE HOW WELL THE MUSICIANS PLAYED EVEN AT REHEARSAL, AND HOW THE SOUND CHANGED THE MORE THEY PLAYED TOGETHER."

OREGON SYMPHONY MUSICIANS AND OUR TWO ARTISTS-IN-RESIDENCE ALSO VISITED SCHOOLS THROUGHOUT OUR REGION. THEY VISITED BAND AND ORCHESTRA ENSEMBLES TO COACH STUDENT ARTISTS DURING IN-SCHOOL REHEARSALS, HOSTED

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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MASTERCLASSES TO SHARE INNOVATIVE TEACHING TECHNIQUES WITH LARGE GROUPS OF STUDENTS, AND VISITED ELEMENTARY SCHOOLS TO HOST INFORMATIONAL PERFORMANCES ("INFORMANCES") THAT INSPIRE YOUNG STUDENTS TO STUDY MUSIC.

BEYOND ITS ABILITY TO SUPPORT LEARNING, MUSIC SUPPORTS EMOTIONAL WELLBEING FOR PEOPLE OF ALL AGES AND BACKGROUNDS. FOR INSTANCE, OUR 2023 LULLABY PROJECT IN PARTNERSHIP WITH PATH HOME SUPPORTED FAMILIES IN HOUSING TRANSITION. WORKING WITH SYMPHONY MUSICIANS AND LOCAL SINGER-SONGWRITERS, EACH FAMILY WROTE AND PROFESSIONALLY RECORDED A LULLABY THAT HONORED THEIR FAMILY. WE DEBUTED THESE HEARTFELT SONGS BEFORE 200+ COMMUNITY MEMBERS AT AN IN-PERSON FREE CONCERT AT THE ALBERTA ROSE THEATER IN MAY; THE SONGS CONTINUE TO LIVE ON OUR WEBSITE.

RECOGNIZING THAT MANY PEOPLE WOULD BENEFIT FROM THE HEALING POWER OF MUSIC WHO ARE UNABLE TO ATTEND AN IN-PERSON CONCERT, WE TAKE OUR MUSICIANS TO MEET NEIGHBORS WHERE THEY ARE. IN APRIL, AN OREGON SYMPHONY STRING QUARTET VISITED SANTIAM CORRECTIONAL INSTITUTE IN SALEM TO AID INMATES' REHABILITATION. ONE MAN SAID, "LISTENING TO YOUR MUSIC WAS THE MOST PEACEFUL I'VE FELT SINCE I GOT HERE." IN MAY, XAVIER FOLEY PERFORMED FOR AND SPOKE WITH RESIDENTS OF ST. MARY'S HOME FOR BOYS. FOR BOTH THESE GROUPS, MUSIC PROMOTES THE DEVELOPMENT OF POSITIVE BEHAVIORS AND HELPS IMPROVE IMPULSE CONTROL.

OUR MUSICIANS HELPED TO MARK SIGNIFICANT CULTURAL OCCASIONS AS WELL. IN RECOGNITION OF AANHPI HERITAGE MONTH, WE PARTNERED WITH THE PORTLAND JAPANESE GARDEN TO PROVIDE A FULL DAY OF FREE PERFORMANCES FOR ALL GARDEN VISITORS TO ENJOY. GROUPS OF MUSICIANS SHARED CULTURALLY

Name of the organization OREGON SYMPHONY ASSOCIATION	Employer identification number 93-0446527
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RELEVANT MUSIC, CULMINATING IN SIMONE LAMSMA'S PERFORMANCE ALONGSIDE A TRADITIONAL JAPANESE KOTO PLAYER AND REMARKS FROM PRINCIPAL GUEST CONDUCTOR JUN MRKL ON HIS OWN JAPANESE HERITAGE. ALSO IN MAY, WE PARTICIPATED IN THE SECOND ANNUAL OREGON RISE AGAINST HATE EVENT AT LAN SU CHINESE GARDEN, HONORING AANHPI COMMUNITIES AND DEMANDING AN END TO ANTI-ASIAN HATE AND DISCRIMINATION. OTHER EXAMPLES INCLUDED SYMPHONY VIOLINIST INS VOLGAR BELGIQUE PERFORMING AT AN EVENT FOR THE LOCAL NONPROFIT VENEZUELA'S VOICE IN OREGON, A PERCUSSION ENSEMBLE PLAYING AT THE GRADUATION CEREMONY FOR THE RUSSIAN IMMERSION READING PROGRAM AT KELLY ELEMENTARY SCHOOL IN SE PORTLAND, AND VADIM GLUZMAN PERFORMING FOR STUDENTS AT CONGREGATION BETH ISRAEL.

AS WE DO EACH YEAR, WE OFFERED SPECIAL CONCERTS FOR FREE TO OUR COMMUNITY. IN ADDITION TO THE WATERFRONT CONCERT DESCRIBED IN OUR MID-YEAR REPORT, THIS SPRING WE HOSTED THE "IN HARMONY" CELEBRATION CONCERT WHICH FILLED THE HALL WITH FAMILIES INVITED THROUGH OUR NONPROFIT PARTNERS. FOR MANY ATTENDEES, SUCH A FREE SHOW MAY BE THEIR ONLY OPPORTUNITY TO HEAR LIVE MUSIC. THIS CONCERT INCLUDED THE DEBUT OF A PIECE, BORN OUT OF OUR PARTNERSHIP WITH OUTSIDE THE FRAME (OTF), WHICH USES FILM AS AN ENGAGEMENT TOOL TO SUPPORT HOMELESS AND MARGINALIZED YOUTH. CREATIVE CHAIR KAHANE WORKED WITH OTF YOUTH TO COLLABORATIVELY WRITE A PIECE THAT INCLUDED ORIGINAL FOOTAGE THAT THE STUDENTS HAD FILMED. THE EVENING ALSO INCLUDED A PIECE BY GIANCARLO CASTRO, A PORTLAND-BASED, VENEZUELAN COMPOSER WHOSE COMMISSIONED WORK WE WILL PREMIERE IN OUR UPCOMING SEASON.

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

THE EXECUTIVE COMMITTEE IS AUTHORIZED TO ACT ON BEHALF OF THE BOARD DURING

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

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

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
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		
s Other transfer of cash or property from related organization(s)		

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	202,080. 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 supplemental information.