Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2017

Open to Public

Department of the Treasury Internal Revenue Service 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.

| A | For the | 2017 calendar year, or tax year beginning 09/01 , 2017, and end | ing 08 | 3/31 | , 20 18 | |
|--------------------------------|-------------|--|------------------|-------------------|--------------------------------|--|
| В | Check if | applicable: C Name of organization UTAH SYMPHONY & OPERA | | D Employ | er identification number | |
| | Address | change Doing business as Utah Symphony I Utah Opera | | 51-0145980 | | |
| | Name ch | N. J. J. J. P. J. S. J. | suite | E Telepho | ne number | |
| | Initial ret | | | | 801-533-5626 | |
| | | m/terminated City or town, state or province, country, and ZIP or foreign postal code | | | | |
| | Amende | d return Salt Lake City, UT, 84101 | | G Gross re | eceipts \$ 22,461,244 | |
| П | | ion pending F Name and address of principal officer: Paul Meecham | H(a) Is this a o | roup return for | subordinates? Yes No | |
| | | 123 West South Temple, Salt Lake City, UT 84101 | | | s included? Yes No | |
| $\overline{}$ | Tax-exe | mpt status: | | | ee instructions) | |
| J | Website | | H(c) Group | exemption | number ▶ | |
| K | Form of o | organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form | | | of legal domicile: UT | |
| Р | art I | Summary | | | | |
| | 1 | Briefly describe the organization's mission or most significant activities: Miss | ion - Connect | the comn | nunity through great | |
| e | | live music. Perform - Engage - Inspire. Vision - USUO will be recognized nationally | | | | |
| Activities & Governance | | (Continued on Schedule O, Statement 1) | | | | |
| ern | 2 | Check this box ▶ ☐ if the organization discontinued its operations or disposed | of more than | 1 25% of | its net assets. | |
| Š | 3 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 56 | |
| æ | 4 | Number of independent voting members of the governing body (Part VI, line 1b | o) | 4 | 53 | |
| ies | 5 | Total number of individuals employed in calendar year 2017 (Part V, line 2a) | | 5 | 549 | |
| Ĭ | 6 | Total number of volunteers (estimate if necessary) | | 6 | 632 | |
| Aci | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | | 7a | 0 | |
| | b | Net unrelated business taxable income from Form 990-T, line 34 | | 7b | 0 | |
| | | · | Prior Yo | ear | Current Year | |
| Φ | 8 | Contributions and grants (Part VIII, line 1h) | 13 | 3,133,091 | 12,880,867 | |
| ğ | 9 | Program service revenue (Part VIII, line 2g) | | 7,030,065 | 7,424,721 | |
| Revenue | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 1,760,737 | 1,826,081 | | |
| Œ | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 279,282 | -91,233 | |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 22 | 2,203,175 | 22,040,436 | |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | | 0 | 0 | |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0 | 0 | |
| S | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 15 | 5,043,024 | 15,359,484 | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | 0 | 0 | |
| ф | b | Total fundraising expenses (Part IX, column (D), line 25) ► 1,213,815 | | | | |
| ш | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 7 | 7,463,558 | 7,969,048 | |
| | 18 | Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . | 22 | 2,506,582 | 23,328,532 | |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | | -303,407 | -1,288,096 | |
| o S | 3 | | Beginning of Cu | ırrent Year | End of Year | |
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) | 44 | 1,141,127 | 45,797,546 | |
| A As | 21 | Total liabilities (Part X, line 26) | 4 | 1,223,123 | 5,037,548 | |
| | | Net assets or fund balances. Subtract line 21 from line 20 | 39 | 9,918,004 | 40,759,998 | |
| P | art II | Signature Block | | | | |
| | | lties of perjury, I declare that I have examined this return, including accompanying schedules and sta | | | my knowledge and belief, it is | |
| tru | ie, correc | t, and complete. Declaration of preparer (other than officer) is based on all information of which prepa | rer nas any know | leage. | | |
| ٠. | | | | | | |
| Sig | _ | Signature of officer | Da | ate | | |
| He | ere | Steve Hogan, VP Finance/CFO | | | | |
| | | Type or print name and title | | _ | | |
| Pa | nid | Print/Type preparer's name Preparer's signature | Date | Check | if PTIN | |
| | epare | er | | self-em | ployed | |
| | se Onl | | Firr | n's EIN ▶ | | |
| | | Firm's address ▶ | Pho | one no. | | |
| Ma | ıy the IF | RS discuss this return with the preparer shown above? (see instructions) | | | 🗌 Yes 🗌 No | |

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| Part | Il Statement of Program Service Accomplishments |
|------|---|
| | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefly describe the organization's mission: |
| | Mission - Connect the community through great live music. Vision - Perform, engage, inspire. The artistic leadership of the |
| | organization is committed to representing a broad range of musical styles, including traditional works, contemporary pieces, and |
| | new commissions to add to the canon of classical music. Community investment in Utah Symphony Utah Opera strengthens our |
| _ | (Continued on Schedule O, Statement 2) |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? |
| | |
| 3 | If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program |
| J | services? |
| | 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 \$ 12,641,758 including grants of \$ 0) (Revenue \$ 4,656,366) |
| | Code 711130 SYMPHONIC CONCERTS - The Utah Symphony was founded during the Great Depression as a Works Progress |
| | Administration orchestra under Roosevelt's New Deal. Today, the Utah Symphony is the premier orchestra in the Intermountain |
| | West and one of only fifteen year-round orchestras (meaning full salary, benefits, and performing schedule) in the nation. This |
| | ranking compares favorably to Utah's rank of 31st among states in population size. The Utah Symphony presents over 200 |
| | concerts at Abravanel Hall and in communities throughout Utah, reaching approximately 135,619 during the season. A variety of |
| | programs are offered featuring some of the industry's most illustrious artists in performance with the Utah Symphony in programs |
| | ranging from Classical Symphonies, to Jazz, to Pops. Please see utahsymphony.org for more information. The Utah Symphony |
| | Utah Opera's Education Program benefits Utah's children and is one of the largest in the country, reaching more than 157,561 |
| | students and 7,213 teachers annually. Through our education program offerings, each school district in Utah is visited every three |
| | to five years. The reach of this programming is far greater than performing arts organizations in other metropolitan areas. In |
| | addition to visits to schools, the programs provide opportunities for students to attend performances, rehearsals, master classes, (Continued on Schedule O, Statement 3) |
| 4b | (Code:) (Expenses \$ 3,650,417 including grants of \$ 0) (Revenue \$ 932,498) |
| | Code 711110 OPERA PERFORMANCES - Utah Opera performs in Salt Lake City's Capitol Theatre, reaching an audience of an |
| | estimated 29,994 during the season. Utah Opera offers 20 performances of four mainstage productions each year, has a |
| | nationally-renowned set and costume shop, and features some of the top singers, directors, conductors, and designers from |
| | around the country. A Resident Artists program provides aspiring young singers an opportunity to refine their craft while |
| | performing secondary roles and singing in education and community outreach programs. Please see utahopera.org for more |
| | information. A prime example of the services we are able to render to the arts community is the value housed in the Utah Opera |
| | Production Studios. The Utah Opera Production Studios houses a team of artisans, designers, and skilled craftsmen who bring the |
| | art form of opera to life for Utah Opera and performing arts organizations around the world through its sets and costumes |
| | construction and rentals programs. One of the only facilities of its kind, The Utah Opera Production Studios bring the integration of |
| | all production activities of the Utah Symphony Utah Opera to one resourceful location (Costume Shop & Rentals, Prop Studio, |
| | Scenic Shop & Scenic Studio, Set Storage, Assembly Bay, Rehearsal Hall, and Chorus Rooms) and allows the organization to (Continued on Schedule O, Statement 4) |
| 4c | (Code:) (Expenses \$ 2,423,881 including grants of \$ 0) (Revenue \$ 1,763,872) |
| | Code 711130 DEER VALLEY MUSIC FESTIVAL - The Deer Valley Music Festival is the summer home of the Utah Symphony, |
| | reaching an audience of an estimated 46,866 during the summer season. The festival provides chamber music, classical, family, |
| | and pops offerings in many venues: the Deer Valley Snow Park Outdoor Amphitheater, St. Mary's Church, and salons in private |
| | Park City homes. Please see deervalleymusicfestival.org for more information. |
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| | |
| 4d | Other program services (Describe in Schedule O.) See Schedule O, Statement 5 |
| т | (Expenses \$ 1,333,990 including grants of \$ 0) (Revenue \$ 71,985) |
| 4e | Total program service expenses ► 20,050,046 |

| Part | Checklist of Required Schedules | | | |
|------|--|-----|----------|----|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | ~ | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | v | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | ~ |
| 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</i> "Yes," <i>complete Schedule C, Part II</i> | 4 | | ~ |
| 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 Revenue Procedure 98-19? If "Yes," complete Schedule C, | | | |
| | Part III | 5 | | ~ |
| 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? If "Yes," complete Schedule D, Part I | 6 | | , |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | _ |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III | 8 | ~ | |
| 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</i> "Yes," <i>complete Schedule D, Part IV</i> | 9 | | , |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | , | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | , | |
| 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? If "Yes," complete Schedule D, Part VII | 11b | | , |
| С | 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? If "Yes," complete Schedule D, Part VIII | 11c | | ~ |
| 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? If "Yes," complete Schedule D, Part IX | 11d | | , |
| | Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> 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</i> "Yes," <i>complete Schedule D, Part X</i> . | 11e | ✓ | ~ |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | / | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | , |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | ~ |
| 14 a | g., | 14a | | ~ |
| 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? If "Yes," complete Schedule F, Parts I and IV | 14b | | , |
| 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? If "Yes," complete Schedule F, Parts II and IV | 15 | | , |
| 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? If "Yes," complete Schedule F, Parts III and IV. | 16 | | ~ |
| 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 | | ~ |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. | 18 | ~ | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | , |

| Part | Checklist of Required Schedules (continued) | | | |
|----------|--|------------|----------|-----------------|
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | Yes | No |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20a | | |
| 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? If "Yes," complete Schedule I, Parts I and II | 21 | | , |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | , |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | ~ | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | ~ |
| b c | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 24d 25a | | ~ |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | , |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II | 26 | | , |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i> | 27 | | ~ |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a b | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a 28b | | \(\triangle \) |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | ~ | |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | 29 | ✓ | |
| 31 | conservation contributions? If "Yes," complete Schedule M | 30 | | \(\tau \) |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | , |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | , |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | | , |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 35b | | ~ |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i> | 36 | | , |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | , |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. | 38 | · | |

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 | | | |
|----------|---|----------|----------|----|
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 250 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | ~ | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 549 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | ~ | |
| _ | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | ~ |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | ~ |
| | account)? | 4a | | • |
| b | If "Yes," enter the name of the foreign country: ▶ | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | ~ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | ~ |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5с | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | ~ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| _ | gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7- | | |
| L | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7a 7b | V | |
| b | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 76 | _ | |
| C | required to file Form 8282? | 7с | | / |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 70 | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | ~ |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . | 7f | | ~ |
| g g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | ~ |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | ~ |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| a | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| | the organization is licensed to issue qualified health plans | | | |
| С | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | ~ |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | | |

Form 990 (2017)

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 56 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 in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b 53 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b 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 in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a ~ 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? 11a b Describe in 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 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c ~ 13 Did the organization have a written whistleblower policy? 13 ~ 1 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a / 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ UT 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ☐ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 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: ▶ Steve Hogan, (801)869-9057

Part VI

| orm 990 (2017) | Page 7 |
|----------------|---------------|
|----------------|---------------|

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

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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

| Check this box if neither the organization no | r any relate | d orga | aniz | atio | n c | ompe | nsa | ated any currer | t officer, director | r, or trustee. |
|--|-----------------------------|--------------------------------|-----------------------|---|--------------|------------------------------|--------|---------------------------------|---------------------------|-----------------------|
| | | | | ((| C) | | | | | |
| (A) | (B) | ,, | | | ition | | | (D) | (E) | (F) |
| Name and Title | Average | | | t check more than one nless person is both an | | | | Reportable | Reportable | Estimated |
| | hours per week (list any | | | | | or/trus | tee) | compensation from | compensation from related | amount of other |
| | hours for | or c | Inst | Officer | ₹ e | Hig | Former | the | organizations | compensation |
| | related organizations | Individual trustee or director | Institutional trustee | cer | Key employee | hest | mer | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization |
| | below dotted | tor tr | onal | | ploy | con | | (**-2/1099-141100) | | and related |
| | line) | uste | trus | | ee | ipen | | | | organizations |
| | | Ф | tee | | | Highest compensated employee | | | | |
| | | | | | | | | | | |
| Jesselie Barlow Anderson | 2.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Doyle L Arnold | 2.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Elizabeth Beilman | 20.00 | | | | | | | | | |
| Ex-officio-Musician | | ~ | | | | | | 66,636 | 0 | 24,938 |
| Judith M Billings | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Howard S Clark | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Gary L Crocker | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| John D'Arcy | 2.00 | | | | | | | | | |
| Treasurer | | ~ | | | | | | 0 | 0 | 0 |
| Mark Davidson | 20.00 | | | | | | | | | |
| Ex-Officio - Musician | 0.00 | ~ | | | | | | 100,177 | 0 | 21,163 |
| David Dee | 2.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Alex J Dunn | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Robert Fudge | 1.00 | | | | | | | | | |
| Ex-Officio - Ogden Symphony Ballet Association | | ~ | | | | | | 0 | 0 | 0 |
| Kem C Gardner | 3.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Brian Greeff | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Lynnette Hansen | 0.50 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |

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

| (A) Name and Title | (B) Average hours per week (list any | box, | unles | Pos neck ss pe | (C) Position eck more than one s person is both an a director/trustee) | | | (D) Reportable compensation from | (E) Reportable compensation from related | (F) Estimated amount of other |
|-----------------------|--|-----------------------------------|-----------------------|----------------------|--|------------------------------|--------|--|--|--|
| | hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| Matthew S Holland | 0.50 | | | | | | | | | |
| Trustee | | 1 | | | | | | 0 | 0 | 0 |
| Thomas N Jacobson | 1.00 | | | | | | | | - | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Annette W Jarvis | 2.00 | | | | | | | | | |
| Secretary | | ~ | | | | | | 0 | 0 | 0 |
| Mitra Kashanchi | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Thomas M Love | 2.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Brad W Merrill | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| William H Nelson | 2.00 | | | | | | | | | |
| Vice Chair | | ~ | | | | | | 0 | 0 | 0 |
| Theodore F Newlin III | 2.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Dee O'Donnell | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Dinesh Patel | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Frank R Pignanelli | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Gary B Porter | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Shari H Quinney | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Brad Rencher | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |

Form 990 (2017) Page **7 - 3**

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

| | | | | ((| C) | | | | | |
|--------------------------------|-----------------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|---------------------------------|---------------------------|-----------------------|
| (A) | (B) | (40.00 | | | ition | e than o | | (D) | (E) | (F) |
| Name and Title | Average | ١, | | | | is both | | Reportable | Reportable | Estimated |
| | hours per week (list any | | | | lirect | or/trust | | compensation from | compensation from related | amount of other |
| | hours for | Individual trustee or director | Inst | Officer | Key | High | Former | the | organizations | compensation |
| | related organizations | vidu | E E | cer | em | nest | ner | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization |
| | below dotted | de tr | Institutional trustee | | Key employee | com | | (VV 2/ 1000 WIIOO) | | and related |
| | line) | uste | trus | | ee | lpen | | | | organizations |
| | | Ф | tee | | | Highest compensated employee | | | | |
| | | | | | | | | | | |
| Margaret Sargent | 1.00 | | | | | | | | | |
| Ex-officio-Utah Symphony Guild | 3.00 | ~ | | | | | | 0 | 0 | 0 |
| Joanne F Shiebler | 2.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Diane Stewart | 0.25 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Naoma Tate | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Thomas Thatcher | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| David Utrilla | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Judith Vander Heide | 0.50 | | | | | | | | | |
| Ex-Officio - Ogden Opera Guild | | ~ | | | | | | 0 | 0 | 0 |
| Craig C Wagstaff | 0.50 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Bob Wheaton | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Kim R Wilson | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Thomas Wright | 1.00 | | | | | | | | | |
| Trustee | | ~ | | | | | | 0 | 0 | 0 |
| Paul Meecham | 40.00 | | | | | | | | | |
| President & CEO | 0.00 | ~ | | ~ | | | | 304,771 | 0 | 102,748 |
| David Green | 40.00 | | | | | | | | | |
| Senior VP & COO | | | | ~ | | | | 127,392 | 0 | 40,726 |
| Steve Hogan | 40.00 | | | | | | | | | |
| VP of Finance & CFO | | | | ~ | | | | 116,910 | 0 | 34,635 |

| Nours per week (list any hours for related organizations below dotted line) Nours for related organizations (W-2/1099-MISC) Nours for method organizations (W- | - | | |
|--|---|--------|--|
| Name and title Average hours per week (list any hours for related organizations below dotted line) Madeline Adkins Concertmaster 0.00 Ralph Matson 20.00 Musician 0.00 Ralph Matson 20.00 Musician 0.00 Concertmaster 0.00 0.00 Concertmaster 0.00 | | | |
| Nours for related organization organizations below dotted line Nours for related organizations for organization (W-2/1099-MISC) Nours for related organizations (W-2/1099-MISC) Nours for related organization (Nours fo | (F) imated ount of | | |
| Concertmaster 0.00 ✓ 181,726 0 Ralph Matson 20.00 ✓ 172,794 0 Musician 0.00 ✓ 172,794 0 Kathryn Eberle 20.00 ✓ 113,875 0 Leslie Peterson 40.00 ✓ 103,590 0 VP of Development ✓ 103,590 0 | other bensation om the nization related nization | n I | |
| Ralph Matson 20.00 Musician 0.00 Kathryn Eberle 20.00 Musician 0.00 ✓ 113,875 Leslie Peterson 40.00 VP of Development ✓ | | | |
| Musician 0.00 ✓ 172,794 0 Kathryn Eberle 20.00 ✓ 113,875 0 Musician 0.00 ✓ 113,875 0 Leslie Peterson 40.00 ✓ 103,590 0 VP of Development ✓ 103,590 0 | 5 | 3,141 | |
| Kathryn Eberle 20.00 Musician 0.00 Leslie Peterson 40.00 VP of Development ✓ 113,875 0 103,590 0 | | | |
| Musician 0.00 ✓ 113,875 0 Leslie Peterson 40.00 ✓ 103,590 0 VP of Development ✓ 103,590 0 | 4 | 0,341 | |
| Leslie Peterson 40.00 VP of Development ✓ | • | 7 770 | |
| VP of Development 103,590 0 | 2 | 7,779 | |
| VI di Developinen | 5 | 3,598 | |
| Rainer J Eudeikis 20.00 20.00 | J | 3,370 | |
| Musician 0.00 | 2 | 5,330 | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 1b Sub-total | 42 | 4,399 | |
| c Total from continuation sheets to Part VII, Section A ▶ d Total (add lines 1b and 1c) | 42 | 4,399 | |
| Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► | | , | |
| | Yes | No | |
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated | | | |
| employee on line 1a? If "Yes," complete Schedule J for such individual | | ~ | |
| 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? If "Yes," complete Schedule J for such | | | |
| individual | ~ | | |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person | | ~ | |
| Section B. Independent Contractors | | | |
| 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 o compensation from the organization. Report compensation for the calendar year ending with or within the organizati year. | | ax | |
| (A) (B) (C) Name and business address Description of services Compen | sation | | |
| Love Communications, 546 South 200 West, Salt Lake City, UT 84101 Marketing & Advertising | 61 | 6,600 | |
| Thierry Fischer, 10 Avenue du Mervelet, Geneva 1209, Switzerland Conductor | | 9,655 | |
| Salt Lake County Center, 50 West 200 South, Salt Lake City, UT 84101 Rent | 332,479 | | |
| Deer Valley Resort Co, PO Box 1525, Park City, UT 84060-1525 Venue | | | |
| Peczuh Printing, PO Box 1024, 355 East 100 South, Price, UT 84501 Printing 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 | 33 31 | | |

Part VIII Statement of Revenue

| . ar | VIII | Check if Schedule C | | sponse or note to | anv line in this | Part VIII | | |
|--|--------|---|----------------------------|---------------------------|----------------------|--|---|--|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| Contributions, Giffs, Grants and Other Similar Amounts | 1a | Federated campaigns | | | | | | |
| Gra | b | Membership dues . | | | | | | |
| ts, (An | С | Fundraising events . | | <u> </u> | | | | |
| Gif | d | Related organizations | | | | | | |
| ns, Simi | е | Government grants (cor | · - | 4,344,207 | | | | |
| atio er 9 | f | All other contributions, g | | | | | | |
| 혈 | | and similar amounts not inc | | | | | | |
| ont nd (| g | Noncash contributions include | | | | | | |
| | h | Total. Add lines 1a-1 | <u>†</u> | Business Code | 12,880,867 | | | |
| Program Service Revenue | 0- | D () | | | 4.54.044 | 4 (5 (0 () | | |
| eve | 2a | Performance Sympho | ny | | 4,656,366 | 4,656,366 | 0 | 0 |
| ě | b | Performance Opera | | | 932,498 | 932,498 | 0 | 0 |
| Ž | C | Deer Valley Music Fes Miscellaneous Revenu | | 711130 | 1,763,872 | 1,763,872 | 0 | 0 |
| S | d | wiscellaneous Revent | ue | 711110 | 71,985 | 71,985 | U | 0 |
| lau | e f | All other program ser | vico rovonuo | | 0 | 0 | 0 | |
| ည် | g | Total. Add lines 2a–2 | | | 7,424,721 | 0 | U | 0 |
| | 3 | Investment income | (includina divi | dends interest. | 7,424,721 | | | |
| | | and other similar amo | | • | 1,826,081 | 0 | 0 | 1,826,081 |
| | 4 | Income from investmen | • | oond proceeds | 0 | 0 | 0 | 0 |
| | 5 | Royalties | • | • | 0 | 0 | 0 | 0 |
| | | , | (i) Real | (ii) Personal | | | | |
| | 6a | Gross rents | | 329,575 | | | | |
| | b | Less: rental expenses | | 0 222,355 | | | | |
| | С | Rental income or (loss) | | 0 107,220 | | | | |
| | d | Net rental income or | (loss) | ▶ | 107,220 | 0 | 0 | 107,220 |
| | 7a | Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | | |
| | b | Less: cost or other basis and sales expenses . | | | | | | |
| | С | Gain or (loss) | | 0 0 | | | | |
| | d | Net gain or (loss) . | | ▶ | | | | |
| Other Revenue | 8a | Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18 | 682,969 ed on line 1c). | | | | | |
| Ö | C | Less: direct expenses Net income or (loss) f | | b 198,453 d events . ▶ | -198,453 | | 0 | -198,453 |
| | _ | Gross income from gasee Part IV, line 19 | aming activities. | | -170,455 | | U | -190,433 |
| | b | Less: direct expenses | | b | | | | |
| | С | Net income or (loss) f | | tivities ► | | | | |
| | 10a | Gross sales of in returns and allowance | nventory, less | | | | | |
| | b | Less: cost of goods s Net income or (loss) f | | b ventory • | | | | |
| | | Miscellaneous F | | Business Code | | | | |
| | 11a | | | | | | | |
| | b | | | | | | | |
| | С | | | | | | | |
| | d | All other revenue . | | | 0 | 0 | 0 | 0 |
| | е | Total. Add lines 11a- | -11d | ▶ | 0 | | | |
| | 12 | Total revenue. See in | nstructions | <u></u> ▶ | 22,040,436 | 7,424,721 | 0 | 1,734,848 |
| | | | | | | | | Form 990 (2017) |

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, (A) Total expenses (B) Program service (C) **(D)** Fundraising Management and general expenses 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 . . . 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 . . . Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 1,086,844 297,101 1,815,337 431,392 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages 7 10,575,129 9,823,508 391,886 359,735 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 681,272 646,357 25,993 8,922 Other employee benefits 9 1,478,742 1,315,696 80.312 82.734 10 Payroll taxes 809,004 751,498 29,979 27,527 11 Fees for services (non-employees): Management Legal 13,443 13,443 40,489 40,489 Lobbying 0 0 Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 3,164,197 3,161,709 2,488 12 Advertising and promotion 1,834,664 1,318,177 246,226 270.261 13 Office expenses 60,270 60,270 14 Information technology 104,462 104,462 15 Occupancy 16 492,062 426,258 65,804 17 400,146 388,500 10,655 991 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 21,555 21,555 20 18,975 18,975 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 286.370 77.813 208.557 23 74,769 74,769 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Production 1,049,347 998 1,219,522 169,177 General Administration 62,549 4,339 58,210 0 С 175,575 0 10,029 165,546 d All other expenses е **Total functional expenses.** Add lines 1 through 24e 25 23,328,532 20.050.046 2.064.671 1.213.815 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 | 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 Par | rt X | | |
|-----------------------------|-----|---|---------------------------------|-----|--------------------|
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest-bearing | 1,490,909 | 1 | 1,446,533 |
| | 2 | Savings and temporary cash investments | 0 | 2 | 0 |
| | 3 | Pledges and grants receivable, net | 4,024,348 | 3 | 4,799,577 |
| | 4 | Accounts receivable, net | 1,723,953 | 4 | 1,552,318 |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. | | | |
| | | Complete Part II of Schedule L | 0 | 5 | 0 |
| ts | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | 0 | 6 | 0 |
| Assets | 7 | Notes and loans receivable, net | 0 | 7 | 0 |
| As | 8 | Inventories for sale or use | 0 | 8 | 0 |
| | 9 | Prepaid expenses and deferred charges | 563,498 | 9 | 602,718 |
| | 10a | Land, buildings, and equipment: cost or | | | |
| | | other basis. Complete Part VI of Schedule D 10a 9,313,594 | | | |
| | b | Less: accumulated depreciation 10b 5,597,409 | 3,302,977 | 10c | 3,716,185 |
| | 11 | Investments—publicly traded securities | 32,895,297 | | 33,538,109 |
| | 12 | Investments—other securities. See Part IV, line 11 | 6,900 | 12 | 6,900 |
| | 13 | Investments—program-related. See Part IV, line 11 | 82,397 | 13 | 84,358 |
| | 14 | Intangible assets | 0 | 14 | |
| | 15 | Other assets. See Part IV, line 11 | 50,848 | 15 | 50,848 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 44,141,127 | 16 | 45,797,546 |
| | 17 | Accounts payable and accrued expenses | 1,539,285 | | 1,678,176 |
| | 18 | Grants payable | 0 | | 0 |
| | 19 | Deferred revenue | 2,533,838 | | 2,282,845 |
| | 20 | Tax-exempt bond liabilities | 0 | 20 | 0 |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D . | 0 | 21 | 0 |
| es | 22 | Loans and other payables to current and former officers, directors, | | | |
| Ħ | | trustees, key employees, highest compensated employees, and | | | |
| Liabilities | | disqualified persons. Complete Part II of Schedule L | 0 | | 0 |
| _ | 23 | Secured mortgages and notes payable to unrelated third parties | 0 | 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | 150,000 | 24 | 100,000 |
| | 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 | 0 | | 976,527 |
| | 26 | Total liabilities. Add lines 17 through 25 | 4,223,123 | 26 | 5,037,548 |
| Ses | | Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34. | | | |
| an | 27 | Unrestricted net assets | 5,689,839 | 27 | 4,401,743 |
| Bal | 28 | Temporarily restricted net assets | 5,066,358 | 28 | 5,223,743 |
| פַ | 29 | Permanently restricted net assets | 29,161,807 | 29 | 31,134,512 |
| Net Assets or Fund Balances | | Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. | | | |
| ts (| 30 | Capital stock or trust principal, or current funds | | 30 | |
| sse | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| Ĭ | 32 | Retained earnings, endowment, accumulated income, or other funds . | | 32 | |
| Ne. | 33 | Total net assets or fund balances | 39,918,004 | 33 | 40,759,998 |
| | 34 | Total liabilities and net assets/fund balances | 44,141,127 | 34 | 45,797,546 |
| | | | | | _ ^^^ |

Form 990 (2017) Page **12**

| 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 | | 22,04 | 0,436 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 23,32 | 8,532 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | -1,28 | 8,096 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 39,91 | 8,004 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | 0 |
| 6 | Donated services and use of facilities | 6 | | | 0 |
| 7 | Investment expenses | 7 | | | 0 |
| 8 | Prior period adjustments | 8 | | | 0 |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | 2,13 | 0,090 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | |
| | 33, column (B)) | 10 | | 40,75 | 9,998 |
| 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: Cash Accrual Other | | _ | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," exp | lain ir | 1 | | |
| | Schedule O. | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? . | | | | ' |
| | If "Yes," check a box below to indicate whether the financial statements for the year were comp | iled o | r | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | ' | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited | d on a | a | | |
| | separate basis, consolidated basis, or both: | | | | |
| | ☐ Separate basis ☐ Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over | | t | | |
| | of the audit, review, or compilation of its financial statements and selection of an independent accour | | 2c | ' | |
| | If the organization changed either its oversight process or selection process during the tax year, exp | olain ir | 1 | | |
| | Schedule O. | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set f | orth ir | ۱ | | |
| | the Single Audit Act and OMB Circular A-133? | | 3a | | ~ |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not under | |) | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au | dits. | 3b | | |
| | | | For | m 990 | (2017) |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

Open to Pu

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

| | H SYMPHONY & OPERA | | | | | | 45980 |
|--------|--|--------------------|---|--------------------|---------------------------------------|---|---|
| Pa | t Reason for Public Cha | rity Status (All | organizations must | comple | te this p | art.) See instruction | ns. |
| The | organization is not a private found | ation because it i | is: (For lines 1 through | 12, ched | ck only or | ne box.) | |
| 1 | ☐ A church, convention of church | hes, or associati | ion of churches descr | ibed in s e | ection 17 | '0(b)(1)(A)(i). | |
| 2 | ☐ A school described in section | 170(b)(1)(A)(ii). | (Attach Schedule E (F | orm 990 | or 990-E | Z).) | |
| 3 | ☐ A hospital or a cooperative ho | | | | | | |
| 4 | A medical research organization hospital's name, city, and state | e: | | | | | |
| 5 | An organization operated for section 170(b)(1)(A)(iv). (Com | | college or university | owned c | r operate | ed by a government | al unit described in |
| 6 7 | ☐ A federal, state, or local gover ✓ An organization that normally described in section 170(b)(1 | receives a subs | stantial part of its sup | | | | n the general public |
| 8 | ☐ A community trust described | in section 170(b |)(1)(A)(vi). (Complete | Part II.) | | | |
| 9 | An agricultural research organ or university or a non-land-gra university: | ant college of agr | riculture (see instruction | ons). Ente | er the nan | ne, city, and state of | the college or |
| 10 | An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) | | | | | | |
| 11 | An organization organized and | • | • | - | | | |
| 12 | An organization organized and of one or more publicly supp Check the box in lines 12a through the control of th | orted organizatio | ons described in secti | ion 509(a |)(1) or se | ection 509(a)(2). Se | e section 509(a)(3). |
| а | ☐ Type I. A supporting organization supported organization supporting organization. Y | n(s) the power to | regularly appoint or e | lect a ma | ijority of t | • | ,, , , , , |
| b | ☐ Type II. A supporting orga control or management of organization(s). You must | the supporting of | organization vested in | the same | | | |
| C | Type III functionally integ its supported organization | | | | | | ally integrated with, |
| d | ☐ Type III non-functionally that is not functionally interequirement (see instructional see instructions) | grated. The orga | nization generally mu | st satisfy | a distribu | ution requirement ar | |
| е | functionally integrated, or | Type III non-fund | tionally integrated sup | oporting (| organizat | ion. | |
| f | Enter the number of supported | organizations . | | | | | |
| g | | 1 | | | | T. | |
| | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | listed in you | organization ur governing ment? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | | Yes | No | | |
| (A) | | | | | | | |
| (B) | | | | | | | |
| (C) | | | | | | | |
| (D) | | | | | | | |
| (E) | | | | | | | |
| | | | 1 | | | | l |

18

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) 2013 **(b)** 2014 (c) 2015 (d) 2016 **(e)** 2017 (f) Total grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . 12,880,867 13,242,365 13,425,120 14,783,165 13,133,092 67,464,609 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 0 0 0 0 Total. Add lines 1 through 3. . . . 4 13,242,365 13,425,120 14,783,165 13,133,092 12,880,867 67,464,609 The portion of total contributions by 5 each person (other than governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 67,464,609 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 7 Amounts from line 4 67,464,609 13,242,365 13,425,120 14,783,165 13,133,092 12,880,867 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 1,742,153 1,214,202 1,796,826 1,760,737 1,826,081 8,339,999 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 56,093 50,016 65,986 66,806 0 238,901 **Total support.** Add lines 7 through 10 11 76,043,509 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f) 14 88.72 % Public support percentage from 2016 Schedule A, Part II, line 14 15 331/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2017. 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 10%-facts-and-circumstances test - 2016. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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.)

| | ii trie organization falls to qualify | under the te | sts listed bei | ow, piease co | impiete Fart | 11.) | |
|------------|--|-----------------|------------------|------------------|-------------------|-----------------|-------------|
| | on A. Public Support | | | 1 | | | |
| Calen | dar year (or fiscal year beginning in) 🕨 | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | |
| • | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities | | | | | | |
| | furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | |
| | unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| • | furnished by a governmental unit to the | | | | | | |
| | organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and 3 | | | | | | |
| <i>,</i> a | received from disqualified persons . | | | | | | |
| | · · · · | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| | <u> </u> | | | | | | |
| | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from | | | | | | |
| <u> </u> | line 6.) | | | | | | |
| | on B. Total Support | | T | | | | |
| | dar year (or fiscal year beginning in) | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, rents, | | | | | | |
| | royalties, and income from similar sources . | | | | | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12.) | | | | | | |
| 14 | First five years. If the Form 990 is for th | e organizatio | n's first, secon | d, third, fourth | , or fifth tax ye | ear as a sectio | n 501(c)(3) |
| | organization, check this box and stop her | ·е | | | | | ▶ ┌ |
| Secti | on C. Computation of Public Suppor | t Percentag | e | | | | |
| 15 | Public support percentage for 2017 (line 8 | B, column (f) d | ivided by line 1 | 3, column (f)) | | 15 | % |
| 16 | Public support percentage from 2016 Sch | | - | | | 16 | % |
| Secti | on D. Computation of Investment Inc | come Perce | ntage | | | | |
| 17 | Investment income percentage for 2017 (I | | | y line 13, colu | mn (f)) | 17 | % |
| 18 | Investment income percentage from 2016 | | | - | | 18 | % |
| 19a | 331/3% support tests—2017. If the organi | | | | | | |
| | 17 is not more than 33 ¹ / ₃ %, check this box | | | | | | |
| b | 33 ¹ / ₃ % support tests—2016. If the organiz | _ | = | - | | _ | |
| ~ | line 18 is not more than 33 ¹ / ₃ %, check this b | | | | | | |
| 20 | Private foundation If the organization di | _ | _ | * | - | | _ |

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

| Cu | on A. All Supporting Organizations | | | |
|-----|---|----------|-----|----|
| | | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? 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. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | | | |
| | organization was described in section 509(a)(1) or (2). | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | 3a | | |
| 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)? If "Yes," describe in Part VI when and how the organization made the determination. | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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. | 4a 4b | | |
| С | 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)? 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. | 4c | | |
| ъa | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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). | 5a | | |
| 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? | 5b | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 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? If "Yes," provide detail in Part VI . | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). | | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? | 7 | | |
| 9a | If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Was the organization controlled directly or indirectly at any time during the tax year by one or more | 8 | | |
| Ju | disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. | 9b | | |
| С | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | 9c | | |
| 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)? If "Yes," answer 10b below. | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) | 10b | | |

| Part I | V Supporting Organizations (continued) | | | |
|---------|---|--------|--------|----------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | <u> </u> |
| | A family member of a person described in (a) above? | 11b | | <u> </u> |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI . | 11c | | |
| Section | on B. Type I Supporting Organizations | | | I |
| _ | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | |
| | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported | | | |
| | organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the approximation approach fourth a homeful of any approximation at how there the approached | - | | |
| 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? <i>If "Yes," explain in Part</i> | | | |
| | VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Section | on C. Type II Supporting Organizations | | | <u> </u> |
| Occur | on or Type in Supporting Organizations | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | 163 | 140 |
| • | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| | the supported organization(s). | 1 | | |
| Section | on D. All Type III Supporting Organizations | | | · |
| | | | Yes | No |
| 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? | 1 | | |
| 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? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), 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? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Section | on E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i | nstru | ctions | s). |
| а | ☐ The organization satisfied the Activities Test. <i>Complete line 2 below.</i> | | | |
| b | The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> | | | |
| С | ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (| see in | struct | ions). |
| • | Activities Test Anguar (a) and (b) below | | Vaa | No |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | NO |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | | |
| | that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | a | | |
| J | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> | | | |
| | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| - | trustees of each of the supported organizations? <i>Provide details in Part VI.</i> | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

instructions).

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org | gani | izations | |
|--|------|----------------------------|--------------------------------|
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ | | | |
| 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 1-1/2% 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 .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 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 Check here if the current year is the organization's first as a non-functional | | tegrated Type III supporti | ng organization (see |

| Part | V Type III Non-Functionally Integrated 509(a)(3 | S) Supporting Organi | zations (continued) | | | |
|------------|--|-----------------------------|--|---|--|--|
| Secti | on D - Distributions | | | Current Year | | |
| 1 | Amounts paid to supported organizations to accomplish | exempt purposes | | | | |
| 2 | Amounts paid to perform activity that directly furthers exe | empt purposes of suppo | rted | | | |
| | organizations, in excess of income from activity | | | | | |
| 3 | Administrative expenses paid to accomplish exempt purp | oses of supported orga | nizations | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | | | |
| 5 | 5 Qualified set-aside amounts (prior IRS approval required) | | | | | |
| 6 | | | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | | | |
| 8 | Distributions to attentive supported organizations to whic | h the organization is res | ponsive | | | |
| | (provide details in Part VI). See instructions. | | | | | |
| 9 | Distributable amount for 2017 from Section C, line 6 | | | | | |
| 10 | Line 8 amount divided by line 9 amount | T | | | | |
| Se | ection E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2017 | (iii) Distributable Amount for 2017 | | |
| 1 | Distributable amount for 2017 from Section C, line 6 | | | | | |
| 2 | Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions. | | | | | |
| 3 | Excess distributions carryover, if any, to 2017 | | | | | |
| a | | | | | | |
| b | From 2013 | | | | | |
| c | From 2014 | | | | | |
| d | From 2015 | | | | | |
| е | From 2016 | | | | | |
| f | Total of lines 3a through e | | | | | |
| g | Applied to underdistributions of prior years | | | | | |
| h | Applied to 2017 distributable amount | | | | | |
| <u>i</u> _ | Carryover from 2012 not applied (see instructions) | | | | | |
| <u>j</u> | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | | | |
| 4 | Distributions for 2017 from Section D, line 7: \$ | | | | | |
| a | Applied to underdistributions of prior years | | | | | |
| b | Applied to 2017 distributable amount | | | | | |
| c | Remainder. Subtract lines 4a and 4b from 4. | | | | | |
| 5 | Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | | | |
| 7 | Excess distributions carryover to 2018. Add lines 3j and 4c. | | | | | |
| 8 | Breakdown of line 7: | | | | | |
| а | Excess from 2013 | | | | | |
| b | Excess from 2014 | | | | | |
| c | Excess from 2015 | | | | | |
| d | Excess from 2016 | | | | | |
| е | Excess from 2017 | | | | | |

Part VI

| 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, 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 lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) | , 2b, |
|--|-------|
| Schedule A, Part II, Line 10 - Other income from audition fees, instrument rentals, boutique sales, sheet music rental, and insurance. | |
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Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

| UTAH | SYMPHONY & OPERA | | 51-0145980 |
|------|--|--|---|
| Par | | | ds or Accounts. |
| | Complete if the organization answered ' | | |
| | | (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 | | |
| | funds are the organization's property, subject to the | e organization's exclusive legal contro | ol? Yes 🗌 No |
| 6 | Did the organization inform all grantees, donors, a | and donor advisors in writing that gran | nt funds can be used |
| | only for charitable purposes and not for the benefit | | |
| | conferring impermissible private benefit? | | · · · · · · □ Yes □ No |
| Par | 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 (e.g., recrea | tion or education) Preservation of | f a historically important land area |
| | ☐ Protection of natural habitat | ☐ Preservation of | f a certified historic structure |
| | ☐ Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization he | eld a qualified conservation contribution | on in the form of a conservation |
| | easement on the last day of the tax year. | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| b | Total acreage restricted by conservation easement | ts | 2b |
| С | Number of conservation easements on a certified h | nistoric structure included in (a) | 2c |
| d | Number of conservation easements included in | (c) acquired after 7/25/06, and not | on a |
| | historic structure listed in the National Register . | | 2d |
| 3 | Number of conservation easements modified, trans | sferred, released, extinguished, or terr | ninated by the organization during the |
| | tax year ► | | |
| 4 | Number of states where property subject to conse | | |
| 5 | Does the organization have a written policy re- | | |
| | violations, and enforcement of the conservation ea | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspect | ting, handling of violations, and enforcing of | conservation easements during the year |
| | > | | |
| 7 | Amount of expenses incurred in monitoring, inspecting | ng, handling of violations, and enforcing | conservation easements during the year |
| | ▶ \$ | | |
| 8 | Does each conservation easement reported on line | | |
| | and section 170(h)(4)(B)(ii)? | | |
| 9 | In Part XIII, describe how the organization reports of | | · · · · · · · · · · · · · · · · · · · |
| | balance sheet, and include, if applicable, the text of | <u> </u> | ancial statements that describes the |
| | organization's accounting for conservation easeme | | |
| Part | | · · · · · · · · · · · · · · · · · · · | Other Similar Assets. |
| | Complete if the organization answered | | |
| 1a | If the organization elected, as permitted under SF. | | |
| | works of art, historical treasures, or other similar | • | |
| _ | public service, provide, in Part XIII, the text of the f | | |
| b | If the organization elected, as permitted under S | | |
| | works of art, historical treasures, or other similar | | ducation, or research in furtherance of |
| | public service, provide the following amounts relati | • | |
| | (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X | | • \$ |
| _ | (ii) Assets included in Form 990, Part X | | |
| 2 | If the organization received or held works of art, | | |
| | following amounts required to be reported under S | | |
| а | Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X | | • \$0 |
| b | Assets included in Form 990, Part X | | ► \$ 50,848 |

| Schedul | e D (Form 990) 2017 | | | | | Page 2 |
|---------|--|---------------------|-----------------------|---------------------|---------------------------------------|---------------------|
| Part | · , | Collections of | Art Historical 1 | Treasures or O | ther Similar Ass | |
| 3 | Using the organization's acquisition, a collection items (check all that apply): | accession, and oth | | | | |
| а | ☐ Public exhibition | | d □ Loan | or exchange prog | nrams | |
| b | Scholarly research | | e Other | | | |
| c | ☐ Preservation for future generations | <u>.</u> | C _ Othor | | | |
| 4 | Provide a description of the organizat | | nd explain how t | hev further the or | ganization's exem | nt nurnose in Par |
| • | XIII. | | and oxplain now a | noy raitino tino or | gamzanon o oxom | pr parpood iii i ai |
| 5 | During the year, did the organization assets to be sold to raise funds rather | | | | | □ Yes 🗹 No |
| Part | | | inoa ao part or an | o organization o o | onconorr | ☐ Tes 🗹 NO |
| rare | Complete if the organization 990, Part X, line 21. | | ' on Form 990, F | Part IV, line 9, or | reported an am | ount on Form |
| 1a | Is the organization an agent, trustee, | custodian or oth | er intermediary fo | or contributions of | r other assets no | t |
| | included on Form 990, Part X? | | | | | ☐ Yes ☐ No |
| b | If "Yes," explain the arrangement in Pa | art XIII and comple | ete the following to | able: | | |
| | 31, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1 | | . | | An | nount |
| С | Beginning balance | | | 10 | С | |
| d | Additions during the year | | | 10 | | |
| e | Distributions during the year | | | 10 | e | |
| f | Ending balance | | | 1 | | |
| 2a | Did the organization include an amour | | art X. line 21. for e | scrow or custodia | al account liability? | Yes No |
| | If "Yes," explain the arrangement in Pa | | | | - | |
| Par | | | ' | • | | |
| | Complete if the organization | answered "Yes" | ' on Form 990, F | 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 | 33,032,910 | 31,735,563 | 31,349,298 | 34,775,987 | 34,943,005 |
| b | Contributions | 1,144,273 | 1,147,367 | 401,544 | | 231,026 |
| С | Net investment earnings, gains, and | | | , | · | |
| | losses | 2,999,459 | 1,956,505 | 1,940,720 | -1,213,308 | 1,182,246 |
| d | Grants or scholarships | 0 | 0 | 0 | | 0 |
| е | Other expenditures for facilities and | | | | | |
| | programs | 1,671,619 | 1,650,653 | 1,719,789 | 1,503,873 | 1,291,716 |
| f | Administrative expenses | 83,436 | 155,872 | 236,210 | | 288,574 |
| g | End of year balance | 35,421,587 | 33,032,910 | 31,735,563 | | 34,775,987 |
| 2 | Provide the estimated percentage of t | | | | · · · · · · · · · · · · · · · · · · · | |
| а | Board designated or quasi-endowmer | - | % | ,, (), | | |
| b | Permanent endowment ► | 88 % | · - | | | |
| С | Temporarily restricted endowment ▶ | 3 % | | | | |
| | The percentages on lines 2a, 2b, and | | 00%. | | | |
| 3a | Are there endowment funds not in the | | | at are held and ad | dministered for the |) |
| | organization by: | • | _ | | | Yes No |
| | (i) unrelated organizations | | | | | 3a(i) 🗸 |
| | (ii) related organizations | | | | | 3a(ii) ✓ |
| b | If "Yes" on line 3a(ii), are the related on | | | | | 3b |
| 4 | Describe in Part XIII the intended uses | | | | · • | |
| Part | | | | | | |
| | Complete if the organization | | ' on Form 990. F | Part IV, line 11a. | See Form 990. I | Part X, line 10. |
| | Description of property | (a) Cost or oth | ner basis (b) Cost o | or other basis (c) | Accumulated depreciation | (d) Book value |
| 12 | Land | | 0 | 229,500 | | 229,500 |
| | Buildings | | 0 | 5,472,471 | 3,156,684 | 2,315,787 |
| - | | i i | - I | | | |

0

0

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

27,671

1,657,636

1,926,316

c Leasehold improvements

6,093

543,023

621,782

3,716,185

21,578

1,114,613

1,304,534

. . . •

| Part VII | Investments – Other Securities. | | |
|-------------------------|---|---------------------------|--|
| | Complete if the organization answered "Yes" on Form 990, Par | t 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 | | |
| ` ' | neld equity interests | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | _ |
| (E) | | | |
| (F) (G) | | | |
| (H) | | | |
| | b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | |
| Part VIII | Investments—Program Related. | | |
| rait viii | Complete if the organization answered "Yes" on Form 990, Par | t IV line 11c See I | Form 990 Part X line 13 |
| | (a) Description of investment | (b) Book value | (c) Method of valuation: |
| | | | Cost or end-of-year market value |
| <u>(1)</u> | | | |
| (2) | | | |
| (3) | | | _ |
| (4) | | | |
| (5) | | | + |
| (6) | | | |
| (7) | | | + |
| (8) | | | + |
| (9) Total. (Column (| b) must equal Form 990, Part X, col. (B) line 13.) ▶ | | |
| Part IX | Other Assets. | | |
| | Complete if the organization answered "Yes" on Form 990, Par | t IV. line 11d. See | Form 990. Part X. line 15. |
| | (a) Description | , | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | (I) | | |
| | mn (b) must equal Form 990, Part X, col. (B) line 15.) | | . • |
| Part X | Other Liabilities. | # IV/ I:ma 44a au 444 | Coo Forms 000 Post V |
| | Complete if the organization answered "Yes" on Form 990, Parline 25. | Tiv, line Tie or Ti | . See Form 990, Part X, |
| 1. | (a) Description of liability | | (b) Book value |
| (1) Federal in | | | ., |
| | argo Line of Credit | | 976,527 |
| (3) | ingo Line of Gredit | | 770,327 |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| | b) must equal Form 990, Part X, col. (B) line 25.) ▶ | | 976,527 |
| 2. Liability for | runcertain tax positions. In Part XIII, provide the text of the footnote to the org | janization's financial st | |
| organization's | s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the | text of the footnote ha | s been provided in Part XIII |

Schedule D (Form 990) 2017 Page **4**

| Part | | | • | netuin. | |
|---|---|-----------------------------|--|---|--|
| 4 | Complete if the organization answered "Yes" on Form 990, I | | | 4 | 05.040.470 |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 25,818,179 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 100 | 1 | | |
| a | Net unrealized gains (losses) on investments | 2a 2b | 10/7/50 | | |
| b | Recoveries of prior year grants | 2c | 1,067,650 | | |
| c d | Other (Describe in Part XIII.) | 2d | | | |
| e | Add lines 2a through 2d | | 2,289,285 | 2e | 3,356,935 |
| 3 | Subtract line 2e from line 1 | | | 3 | 22,461,244 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | i | | | 22,401,244 |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 0 | | |
| b | Other (Describe in Part XIII.) | 4b | -420,808 | | |
| | Add lines 4a and 4b | | | 4c | -420,808 |
| 5 | Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line</i> | | | 5 | 22,040,436 |
| Part | | | | | |
| | Complete if the organization answered "Yes" on Form 990, I | | | | - |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 24,976,185 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | 2.1/7.0/1.00 |
| а | Donated services and use of facilities | 2a | 1,067,650 | | |
| b | Prior year adjustments | 2b | 0 | | |
| С | Other losses | 2c | 0 | | |
| d | Other (Describe in Part XIII.) | 2d | 580,003 | | |
| e | Add lines 2a through 2d | | | 2e | 1,647,653 |
| 3 | Subtract line 2e from line 1 | | | 3 | 23,328,532 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 0 | | |
| b | Other (Describe in Part XIII.) | 4b | 0 | | |
| С | Add lines 4a and 4b | | | 4c | 0 |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line | e 18.) | | 5 | 23,328,532 |
| Part : | XIII Supplemental Information. | | | | |
| | e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and | | | | |
| 2; Part | XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part | to pro | ovide any additional in | formation. | • |
| Sched | ule D, Part III, Line 1 - N/A | | | | |
| | | | | | |
| Sched | ule D, Part III, Line 4 - Paintings, sculptures, and rugs in the common areas at | Abrav | anel Hall. | | |
| | | | | | |
| Sched | ule D, Part V, Line 1b - Comes from Net Assets (includes receivables) | | | | |
| | | | | | |
| Sched | ule D, Part V, Line 4 - US&O uses 5% of a 12 month quarterly average to help of | ontrib | oute to the program exp | ense of th | e organization. |
| | | | | | |
| Sched | ule D, Part XI, Line 2d - Interest and dividends on Endowment \$667,014; Realiz | od on | d unrealized gains/loss | 42 000 | 135: |
| | | | | | |
| | butions to Endowment \$783,128; Contributions for future use \$3,407,998; Rele | ase of | contributions intended | d, by dono | r, for current |
| year (| \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use | ase of | contributions intended | d, by dono | r, for current |
| | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use | ase of | contributions intended | d, by dono | r, for current |
| year (\$ (\$890, | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). | ease of \$692, | contributions intender | d, by dono | r, for current grants |
| year (\$ (\$890, Sched | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset t | ease of \$692, | contributions intender | d, by dono | r, for current grants |
| year (\$ (\$890, Sched | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). | ease of \$692, | contributions intender | d, by dono | r, for current grants |
| year (\$ (\$890, Sched Fundra | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). Sulle D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset to aising event expenses reported on 990 Part VIII Line 8b (\$198,453). | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); |
| year (\$ (\$890, Sched Fundra Sched | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset taising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Rest | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |
| year (\$ (\$890,) Sched Fundra Sched Bad D | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset traising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Resilebt \$85,755; Costume/set rental expenses recognized as an offset to rental rev | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |
| year (\$ (\$890,) Sched Fundra Sched Bad D | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset taising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Rest | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |
| year (\$ (\$890,) Sched Fundra Sched Bad D | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset traising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Resilebt \$85,755; Costume/set rental expenses recognized as an offset to rental rev | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |
| year (\$ (\$890,) Sched Fundra Sched Bad D | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset traising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Resilebt \$85,755; Costume/set rental expenses recognized as an offset to rental rev | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |
| year (\$ (\$890,) Sched Fundra Sched Bad D | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset traising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Resilebt \$85,755; Costume/set rental expenses recognized as an offset to rental rev | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |
| year (\$ (\$890,) Sched Fundra Sched Bad D | \$2,929,069); Endowment Draws (\$1,531,735); Government grants for future use 076). ule D, Part XI, Line 4b - Costume/set rental expenses recognized as an offset traising event expenses reported on 990 Part VIII Line 8b (\$198,453). ule D, Part XII, Line 2d - Endowment Investment Expenses \$70,596; Temp Resilebt \$85,755; Costume/set rental expenses recognized as an offset to rental rev | ease of \$692, o rent | contributions intender 890; Release of prior g al revenues on tax retu | d, by dono overnment rn (\$222,35 | r, for current grants 55); owance for |

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or Form 990-EZ.

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

| UTA | H SYMPHONY & OPERA | | | | | | -0145980 |
|----------------------------------|---|---|--|---|--|--|---|
| Pai | Fundraising Activities Form 990-EZ filers are | • | • | | vered "Yes" on | Form 990, Part IV, | line 17. |
| 1 a b c d 2a b | Indicate whether the organizati Mail solicitations Internet and email solicitation Phone solicitations In-person solicitations Did the organization have a wr or key employees listed in Forr If "Yes," list the 10 highest pair compensated at least \$5,000 by | ons itten or oral agre n 990, Part VII) o d individuals or | e f f g eement with or entity in c entities (fun | Solicitat Solicitat Special any individ | ion of non-governion of governmen fundraising events dual (including offwith professional) | ment grants t grants s cers, directors, trust fundraising services | ? 🗌 Yes 🗌 No |
| | (i) Name and address of individual or entity (fundraiser) | (ii) Activity | custody | ndraiser have or control of butions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization |
| | | | Yes | No | | (4) | |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| Tota | | | | • | | | |
| 3 | List all states in which the org registration or licensing. | anization is regi | siered or IIC | ensed to s | | is or has been notifi | eu it is exempt from |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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 |
|-----------------|----------|------------------------------------|----------------------------|--|------------------|--|
| | | | Renee Fleming Gala | Deer Valley Gala | 0 | (add col. (a) through col. (c)) |
| an. | | | (event type) | (event type) | (total number) | 551. (5) |
| Revenue | 1 | Gross receipts | 433,921 | 249,048 | | 682,969 |
| ш | 2 | | 433,921 | 249,048 | | 682,969 |
| | _ | line 2) | 0 | 0 | | 0 |
| | 4 | Cash prizes | 0 | 0 | | 0 |
| | 5 | Noncash prizes | 0 | 0 | | 0 |
| enses | 6 | Rent/facility costs | 46,382 | 20,221 | | 66,603 |
| Direct Expenses | 7 | Food and beverages | 52,341 | 29,514 | | 81,855 |
| Direc | 8 | Entertainment | 4,287 | 31,403 | | 35,690 |
| | 9 | Other direct expenses . | 8,017 | 6,288 | | 14,305 |
| | 10 11 | | | | | 198,453 -198,453 |
| Pa | | Gaming. Complete if the | e organization answei | | | |
| _ | | than \$15,000 on Form 9 | 90-E∠, line 6a. ⊤ | #15 H. I. # | | (87.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1 |
| Revenue | | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
| Re | 1 | Gross revenue | | | | |
| ses | 2 | Cash prizes | | | | |
| Direct Expenses | 3 | Noncash prizes | | | | |
| Jirect | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses . | | | | |
| | 6 | Volunteer labor | ☐ Yes% ☐ No | ☐ Yes% ☐ No | ☐ Yes% ☐ No | |
| | 7 | Direct expense summary. Ac | ld lines 2 through 5 in c | olumn (d) | | |
| | 8 | Net gaming income summar | y. Subtract line 7 from li | ne 1, column (d) | | |
| • | | Enter the state(s) in which the or | ranization conducts as | ming activities: | | |
| | а | Is the organization licensed to co | • | s in each of these states | | 🗌 Yes 🗌 No |
| 10 | | Were any of the organization's g | aming licenses revoked | • | | |

| Schedu | ıle G (Form 990 or 990-EZ) 2017 | | Page 3 |
|----------|---|------|--------------|
| 11 12 | Does the organization conduct gaming activities with nonmembers? | Yes | _ No |
| | formed to administer charitable gaming? | Yes | ☐ No |
| 13 | Indicate the percentage of gaming activity conducted in: The organization's facility | | % |
| a b | The organization's facility | | % |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: | | |
| | Name ► | | |
| | Address► | | |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | Yes | □ No |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party: | | |
| | Name ► | | |
| | Address► | | |
| 16 | Gaming manager information: | | |
| | Name ► | | |
| | Gaming manager compensation ► \$ | | |
| | Description of services provided ▶ | | |
| | □ Director/officer □ Employee □ Independent contractor | | |
| 17 | Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to | | |
| а | retain the state gaming license? | Yes | □No |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ | | |
| Part | | | d |
| | | | |

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

Open to Public Inspection

Employer identification number Name of the organization **UTAH SYMPHONY & OPERA** 51-0145980

| Part | Questions Regarding Compensation | | | |
|------|---|----------|-----|----------|
| | | | Yes | No |
| 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. | | | |
| | ☐ First-class or charter travel ☐ Housing allowance or residence for personal use | | | |
| | ☐ Travel for companions ☐ Payments for business use of personal residence | | | |
| | ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees | | | |
| | ☐ Discretionary spending account ☐ 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 | 41. | | |
| | CAPIGIT. | 1b | | |
| 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? | 2 | | |
| | | | | |
| 3 | Indicate which, if any, of the following the filing 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. | | | |
| | ✓ Compensation committee | | | |
| | ☐ Independent compensation consultant ☐ Compensation survey or study | | | |
| | Form 990 of other organizations 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: | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | ~ |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | ~ |
| С | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | ~ |
| | 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: | | | |
| а | The organization? | 5a | | ~ |
| b | Any related organization? | 5b | | ~ |
| | 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: | 0- | | |
| a | The organization? | 6a 6b | | <i>V</i> |
| b | Any related organization? | OD | | |
| | The soft line of out, describe in that in. | | | |
| 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 | 7 | ~ | |
| 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 | 8 | | ~ |
| | | | | |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | | | |

Schedule J (Form 990) 2017

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 (i) Base compensation (ii) Bonus & incentive compensation (iii) Other reportable compensation Paul Meecham, President & CEO (i) 276,771 28,000 0 62,795 | Nontaxable benefits | (E) Total of columns (B)(i)–(D) | (F) Compensation in column (B) reported as deferred on prior |
|---|---------------------|------------------------------------|--|
| 7 270,771 20,000 0 02,773 | 20.052 | | Form 990 |
| 4 (ii) | 39,953 | 3 407,519 | 0 |
| | C | 0 | 0 |
| David Green, Senior VP & COO (i) 127,392 0 0 10,458 | 30,268 | 168,118 | 0 |
| 2 (ii) 0 0 0 0 | C | 0 | 0 |
| Steve Hogan, VP of Finance & (i) 116,910 0 0 3,677 | 30,958 | 151,545 | 0 |
| 3 CFO (ii) 116,910 0 0 3,677 | C | 0 | 0 |
| Madeline Adkins, Concertmaster (i) 181,726 0 0 24,151 | 28,990 | 234,867 | 0 |
| | C | 0 | 0 |
| Ralph Matson, Musician (i) 172,794 0 0 12,120 | 28,221 | 1 213,135 | 0 |
| 5 (ii) 0 0 0 | C | 0 | 0 |
| Leslie Peterson, VP of (i) 103,590 0 0 23,301 | 30,297 | 7 157,188 | 0 |
| 6 Development (i) 103,590 0 0 23,301 (ii) 0 0 0 | C | 0 | |
| (i) | | | |
| 7 (ii) | | | |
| (i) | | | |
| 8 (ii) | | | |
| (i) | | | |
| 9 (ii) | | | |
| (i) | | | |
| 10 (ii) | | | |
| (i) | | | |
| 11 (ii) | | | |
| (i) | | | |
| 12 (ii) | | | |
| (i) | | | |
| 13 (ii) | | | |
| (i) | | | |
| 14 (ii) | | | |
| (i) | | | |
| 15 (ii) | | | |
| (i) | | | |
| 16 (ii) (iii) | | | <u></u> |

Schedule J (Form 990) 2017 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. Schedule J, Part I, Line 7 - CEO deferred compensation is based on company contribution to 401(k) plan.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

| UTAH SYM | PHONY & OPER | Α | | | | | | | | 51-0 | 01459 | 80 | | |
|----------------------|--------------------------------|--|--|---------------------------|---|---|-----------------|---------------------------------------|-----------------|----------------|---------------|---------------------------|---------|---------|
| Part I | Excess Bene Complete if the | fit Transaction e organization | is (section 501 answered "Ye | l(c)(3), s" on | section : Form 99 | 501(c)(4), a 0, Part IV, I | nd 50 ine 25 | 01(c)(29) organiz 5a or 25b, or Fo | ations rm 99 | only) 0-EZ, | Part ' | V, line | 40b. | |
| 1 (a) N | lame of disqualified | person | (b) Relationship be | etween | disqualified | person and | | (c) Descriptio | n of trai | nsaction | n | | (d) Cor | rected? |
| 1 (u) 1 | ariic or disquaiiiica | person | | organiz | ation | | | (c) Description | ii oi tiai | isactioi | | | Yes | No |
| (1) | | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | | |
| | | | - | | _ | | - | ied persons du | ring t | he ye | | | | |
| | er section 4958 | | | | | | | | | ! | | | | |
| 3 Ente | er the amount o | t tax, it any, on | line 2, above, | reimb | oursed by | the organ | izatio | n | | ! | • \$ | <u> </u> | | |
| Dowl II | | , | | | | | | | | | | | | |
| Part II (a) Name of | Complete if th | /or From Inter the organization the ported an amount (b) Relationship with organization | answered "Ye | es" on 990, P (d) L | Form 990 Part X, line oan to or om the | 0-EZ, Part e 5, 6, or 22 (e) Origin principal an | 2. nal | e 38a or Form 99 | | | (h) Ap | proved | f the | |
| | | , and the second | | | nization? | · · · | | | Yes | No | comn | Part V, line ar \$ \$ \$ | Yes | No |
| (1) | | | | 10 | 110111 | | | | 103 | 110 | 103 | 110 | 103 | 110 |
| (2) | | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | | |
| (9) | | | | | | | | | | | | | | |
| (10) | | | | | | | | | | | | | | |
| Total . | | | | ٠ | <u> </u> | | . ▶ | \$ | | | | | | |
| Part III | Grants or Ass | sistance Benef ne organization | fiting Interest | ed Pe | rsons. | | ine 27 | 7. | | | | | | |
| (a) Name | of interested persor | | ship between inter and the organization | | (c) Amount | of assistance | | (d) Type of assistand | е | (e) | Purpo | se of a | ssistan | се |
| (1) | | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | | |
| (7) | | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | | |
| (9) | | | | | | | | | | | | | | |
| (10) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

| Part IV | Business Transactions Inv Complete if the organization | rolving Interested Persons. n answered "Yes" on Form 990 | , Part IV, line 28a, 2 | 28b, or 28c. | | |
|------------|---|---|------------------------|--------------------------------|-----------------------------|---------|
| | (a) Name of interested person | d person (b) Relationship between interested person and the organization | | (d) Description of transaction | (e) Sha organiz rever | ation's |
| | | | | | Yes | No |
| | om Love | Board Member | | Marketing & Advertising | | ~ |
| | bb Wheaton | Board Member | 316,776 | Venue Rental at Deer Valley | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
| (7) | | | | | | |
| (8) (9) | | | | | | |
| (3) | | | | | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions (| on Schedule I. (see | instructions). | | |
| | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions o | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |
| (10) | Supplemental Information Provide additional information | on for responses to questions of | on Schedule L (see | instructions). | | |

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SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

UTAH SYMPHONY & OPERA

► Attach to Form 990.

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

Name of the organization

Employer identification number

51-0145980

| Part | 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 | Method o | (d) of determin tribution a | • |
| 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 | | 27 | 1,678,830 | average bety | ween high | and lov |
| 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 ► () | | | | | | |
| 26 | Other ► () | | | | | | |
| 27 | Other ► () | | | | | | |
| 28 | Other ► (| | | | | | |
| 29 | Number of Forms 8283 received | by the or | ganization during the tax v | vear for contributions for | | | |
| | which the organization completed | | | | 29 | | |
| | | | | | | Ye | s No |
| 30a | During the year, did the organiza | tion receive | by contribution any prope | erty reported in Part I lines | 1 through | | |
| | 28, that it must hold for at least t | | | | | | |
| | to be used for exempt purposes | | | | | 30a | V |
| b | If "Yes," describe the arrangement | | | | | | |
| 31 | Does the organization have a | gift accep | | | | 04 | |
| 00 | | | | | | 31 🗸 | |
| 32a | Does the organization hire or us contributions? | | • | is to solicit, process, or se | | 32a 🗸 | |
| b | If "Yes," describe in Part II. | | | | | | |
| 33 | If the organization didn't report an | amount in | column (c) for a type of pro | perty for which column (a) | is checked, | | |
| | describe in Part II. | | | | | | |

Schedule M (Form 990) 2017 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. Schedule M, Part I, Line 32b - Stock brokers to sell donations

SCHEDULE O (Form 990 or 990-EZ)

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.

2017

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization Employer identification number
UTAH SYMPHONY & OPERA 51-0145980

Form 990, Part VI, Section A, Line 1a - In the absence of Board action or in the event that the Board is unable to take action on a particular matter, the Executive Committee shall have all of the powers and exercise all of the duties of the Board in managing the business of the Corporation. Any such action taken by the Executive Committee in the absence or inability of the Board to take action shall be considered for ratification by the Board at the next regular meeting or special meeting of the Board.

Form 990, Part VI, Section A, Line 2 - Our board is made up of community leaders and as such some business relationships exist and our conflict of interest policy and process adequately reveals and manages these so they are not conflicts for the organization.

Form 990, Part VI, Section A, Line 7a - The Corporation may have three or more appointed ex officio voting Trustees of the Board. These positions shall be comprised of the following: (i) one Ogden Opera Guild representative; (ii) one Utah Symphony Guild representative; (iii) one Ogden Symphony Ballet Association representative; and (iv) such representatives of auxiliary and advisory organizations and guilds as elected by their respective organizations and guilds. Two Musicians, as provided in the Collective Bargaining Agreement between the Corporation and American Federation of Musicians, Local 104, are voting Trustees of the Board.

Form 990, Part VI, Section B, Line 11b - Prepared by CFO, reviewed by Finance and Executive committees, posted to website for entire board review.

Form 990, Part VI, Section B, Line 12c - The values governing the affairs of Utah Symphony & Opera (US&O) are Excellence, Integrity, Trust, and Communication. Staff members are encouraged in their individual capacities to represent these values and to exemplify the highest standards of ethical behavior in all they do and say. They are thus encouraged to do their utmost to respect the rights and dignity of other persons; to be honest, accurate, and open-minded in the presentation of information and ideas; when accounting for US&O's assets or handling financial transactions; when soliciting contributions; when representing US&O before governmental leaders, charitable foundations, patrons, and donors; or when dealing with vendors, partners, lessees, and other parties. A conflict of interest is defined as any circumstance that would cast doubt on the ability of a member of the staff to act with total objectivity with regard to the US&O's best interest. No member shall use his or her position, or the knowledge gained from his or her position, or the knowledge gained from his or her position, in such a manner that a conflict arises between the interest of the organization and the staff members' personal interests. An actual or potential conflict of interest may occur when an employee is in a position to influence a decision that may result in personal gain for that employee or for a relative as a result of business dealings. For the purposes of this policy, a relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage. Utah Symphony & Opera relies on its employees to exercise their responsibilities to the organization in good faith. As a consequence of representing Utah Symphony & Opera, employees may be in a position to establish personal relationships with patrons and donors or obtain confidential information concerning them. Employees may not, directly or indirectly solicit or accept money, loans, expensive gifts, travel, extravagant entertainment, or preferential treatment from such individuals. Employees may not use any information obtained about patrons and donors to further their personal interests during their employment with US&O or after their termination with US&O. In addition to this, the materials, products, designs, plans, ideas, and data of US&O should never be given or sold to an outside agency, firm or person except through normal channels and with appropriate authorization. Any improper transfer of material or disclosure of information, even though it is not apparent that an employee has personally gained by such action, constitutes unacceptable conduct. Any employee who participates in such a practice will be subject to disciplinary action, up to and including possible discharge. Having a conflict of interest may not necessarily indicate a professional transaction cannot occur. However, it is the duty of each staff member to disclose annually any actual or possible conflicts of interest in writing to the Director of Human Resources and Department Head. In the absence of an HR director all disclosures may be communicated to the COO. The employee is expected to provide all material facts and personal interests that may be determined to present a conflict of interest before any discussion or negotiation of a transaction takes place. Immediately upon becoming aware of the possible conflict of interest, the Director of Human Resources and Department Head will discuss the conflict with the COO to determine whether a particular conflict of interest is fair to the organization. The Director of Human Resources, and or Department Head will respond in writing to the employee within 30 days of disclosure. If agreement is not reached, the final determination will be made by the

Form 990, Part VI, Section B, Line 15 - League of American Orchestras Survey for salaries, Opera America, recruiting firm using comparable data, task force of board members as a search committee.

Form 990, Part VI, Section C, Line 19 - We post to our website, provide copies upon request as well as publishing board meeting schedules in the newspaper which allows interested persons to attend meetings and request information. Conflict of interest policy is distributed

Supplemental Information (Continued)

| annually. |
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| Form 990, Part VIII, Line 3 - Endowment Draw - \$1,671,619; Interest/Dividends - \$4,928; Gain from Sale of Assets - \$36,206; Unrealized Gains - \$9,902; 5% Draw being Released from Board Rstr - (\$139,884); Interest/Dividends-Board Restr - \$66,838; Realized Gains-Board Restr - \$9,442; Unrealized Gains Board Restr - \$167,030. |
| Form 990, Part IX, Line 11g - Guest Artists \$1,973,232; Guest Conductors \$608,271; Travel \$232,430; Chorus \$147,718; Designers \$107,596; Misc \$94,950. |
| Form 990, Part XI, Line 9 - Government grants for future period-temporary restricted - \$692,890; Government grants from prior period released to operations - (\$890,076); Contributions for future period-temporary restricted - \$3,407,998; Contributions from prior period released to operations - (\$2,929,069); Contributions to endowment-permanent restricted - \$783,128; Interest-temporary restricted - \$9,459; Interest-permanent restricted - \$238,130; Dividends-temporary restricted - \$16,195; Dividends-permanent restricted - \$403,230; Unrealized gains-temporary restricted - \$77,426; Unrealized gains-permanent restricted - \$1,888,748; Realized gain-temporary restricted - \$4,704; |
| Realized gain-permanent restricted - \$118,254; Draws from endowment-temporary restricted - (\$137,744); Draws from endowment-permanent restricted - (\$1,393,991); Management and general expenses-temporary restricted - (\$2,844); Management and general expenses-permanent restricted - (\$70,596); Allowance for bad debts-temporary restricted - (\$91,557); Allowance for bad debts-permanent restricted - \$5,802. |
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Schedule O, Statement 1 UTAH SYMPHONY & OPERA

Form: Form 990 (2017) EIN: 51-0145980

Page: 1 Part I, Line 1

Activity Or Mission Description

Description

community service, innovative thinking, sound governance, and financial stability. We aspire to be known as a top orchestra and opera company, a renowned summer music festival, a destination for artists, an inspiration for audiences, and the beloved cultural treasure of our entire state and beyond.

Schedule O, Statement 2 UTAH SYMPHONY & OPERA

Form: Form 990 (2017)

Page: 2

Part III, Line 1

Mission Description

Description

economy and enhances our quality of life. Utahns have long recognized that a person's quality of life rests, in part, on the community's commitment to the arts to inspire the human spirit and motivate the betterment of mankind. Over the years, Utah has experienced growth and prominence and continues to become established as a hub for business innovation and scientific research in the United States. Utah Symphony | Utah Opera stands as an influential cultural leader that is often cited by companies as an attraction for a successful and talented workforce to the region.

Schedule O, Statement 3 UTAH SYMPHONY & OPERA

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Page: 2 Part III, Line 4a

First Program Service Accomplishments Description

Description

and other great learning events. The community at large is engaged regularly through various Outreach Programs. We present an annual performance for children with special needs and their families reaching nearly 400 families each year, an annual performance for the blind and visually impaired reaching up to 100 members of that community, and a variety of musical events for members of our community who are Alzheimer's care recipients and caregivers in collaboration with the Utah Chapter of the Alzheimer's Association reaching over 300 people each year. Other services coordinated by our Education and Outreach Department include a variety of free lectures, internships, on-line learning courses, teacher re-licensure programs, and a Youth Symphony Festival. A stand-out among Utah Symphony | Utah Opera's projects is our local partnership with local museums, art galleries, libraries, film centers, performing arts groups, and scholars, the Festival provides our community opportunities to explore an artistic theme using all their senses. Additionally, through our volunteer network of over 600 individuals, the Utah Symphony Guild, Ogden Opera Guild, and Youth Guild reach over 500 citizens through their programs and events each year. Utah Symphony | Utah Opera is engaged in valuable cooperative relationships with many other non-profit organizations that serve a variety of purposes, including The Road Home, Utah School Boards, Ballet West, Madeleine Cathedral Choir School, Children's Dance Theatre and Utah Shakespeare Festival. It is also notable that, through a close relationship with the communities it serves, Utah Symphony | Utah Opera is able to reinvest into Utah's economy. *The organization employs over 450 individuals each year. *An estimated 93% of Utah Symphony | Utah Opera expenses are fed directly back into the local economy. *Economic development professionals concur that a vibrant symphony and opera are important criteria in attracting new businesses and skilled professionals to Utah. *Source: Salt Lake County

Schedule O, Statement 4 UTAH SYMPHONY & OPERA

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Second Program Service Accomplishments Description

Description

utilize a business model which combines all aspects of both symphonic and operatic art forms. Production needs for performances at Abravanel Hall, the Capitol Theatre, and even the Deer Valley Music Festival can be designed and built with the resources found in this building. This has resulted in valuable cost savings and artistic synergy for the organization and the community. Utah Symphony | Utah Opera reaches over 349,000 people every year through live performances.

Schedule O, Statement 5 UTAH SYMPHONY & OPERA

Form: Form 990 (2017)

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Page: **2**

Other Program Services Accomplishments

| Activity Code | Description | Expense | Grants | Revenue |
|------------------|--|-----------|--------|---------|
| | Depreciation of Set Equipment - \$77,813; Marketing - \$603,977; Box Office - \$416,063; | 1,333,990 | 0 | 71,985 |
| | Education - \$210,369; Misc - \$25,768 | | | |
| Total: | | 1,333,990 | 0 | 71,985 |