

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation).

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

**2004****Open to Public Inspection****A** For the 2004 calendar year, or tax year beginning **September 01**, 2004, and ending **August 31**, 20 05**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific instructions.

**C** Name of organization**UTAH SYMPHONY & OPERA**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

**123 WEST SOUTH TEMPLE**

City or town, state or country, and ZIP + 4

**SALT LAKE CITY, UT 84101****D** Employer identification number**51 0145980****E** Telephone number**( 801 ) 533-5626****F** Accounting method: ☐ Cash ☒ Accrual☐ Other (specify) ▶

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

**H** and **I** are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☐ No**H(b)** If "Yes," enter number of affiliates ▶**H(c)** Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No**I** Group Exemption Number ▶**G** Website: ▶ **www.utahsymphonyopera.org****J** Organization type (check only one) ▶ ☒ 501(c) ( 3 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check here ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **18,711,854****M** Check ▶ ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	8,351,666		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	3,988,166		
	d	Total (add lines 1a through 1c) (cash \$ 12,337,527 noncash \$ 2,305 )	1d	12,339,832		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	4,125,773		
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4			
	5	Dividends and interest from securities	5	98,153		
	6a	Gross rents	6a	296,476		
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	296,476		
7	Other investment income (describe ▶ )	7	1,673,830			
	8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	b	Less: cost or other basis and sales expenses	8a			
	c	Gain or (loss) (attach schedule)	8b			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
	8d					
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b				
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11	Other revenue (from Part VII, line 103)	11	177,790			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	18,711,854			
Expenses	13	Program services (from line 44, column (B))	13	15,510,958		
	14	Management and general (from line 44, column (C))	14	2,314,865		
	15	Fundraising (from line 44, column (D))	15	941,573		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	18,767,396		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	(55,542)		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	44,710,337		
	20	Other changes in net assets or fund balances (attach explanation). <b>EXHIBIT A</b>	20	(1,231,400)		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	43,423,395		

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒ **X**
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

## Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only. ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

Type or print	Name of Exempt Organization	Employer identification number
	UTAH SYMPHONY & OPERA	51-0145980
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	123 WEST SOUTH TEMPLE	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	SALT LAKE CITY, UT 84101	

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ▶ **STEVE HOGAN**

Telephone No. ▶ **(801) 869-9057** FAX No. ▶ **(801) 869-9056**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until **APRIL 17**, 2006 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☐ calendar year . . . . . or

▶ ☒ tax year beginning **SEPTEMBER 1**, 2004, and ending **AUGUST 31**, 2005.

**2** If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

**3a** If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . . \$

**b** If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit . . . . . \$

**c** Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . . \$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 12-2004)

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	270,250	105,082	60,085
26	Other salaries and wages	26	8,800,953	7,590,272	344,092
27	Pension plan contributions	27	725,696	615,628	32,334
28	Other employee benefits	28	899,332	662,258	52,273
29	Payroll taxes	29	693,947	588,694	30,920
30	Professional fundraising fees	30			
31	Accounting fees	31	207,545	207,545	
32	Legal fees	32			
33	Supplies	33	49,937	24,099	1,262
34	Telephone	34	46,065	4,506	
35	Postage and shipping	35	37,495	47	3,388
36	Occupancy	36	243,938	190,060	
37	Equipment rental and maintenance	37	38,335	38,109	226
38	Printing and publications	38	278,035	246,618	29,705
39	Travel	39	937,309	915,884	6,627
40	Conferences, conventions, and meetings	40	9,084	9,084	
41	Interest	41	79,393	79,393	
42	Depreciation, depletion, etc. (attach schedule)	42	431,009	165,855	265,154
43	Other expenses not covered above (itemize): a	43a			
b	SEE EXHIBIT F	43b	5,019,073	4,354,762	380,887
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	18,767,396	15,510,958	2,314,865

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See page 25 of the instructions.)What is the organization's primary exempt purpose? **Perform & Educate by Utah Symphony & Opera.**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses  
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a	SYMPHONIC CONCERTS-THIS YEAR THE SYMPHONY PERFORMED FOR AN ESTIMATED AUDIENCE OF 124,000	
	(Grants and allocations \$ _____)	12,335,580
b	OPERA PERFORMANCES-THIS YEAR THE OPERA PERFORMED FOR AN ESTIMATED AUDIENCE OF 34,000	
	(Grants and allocations \$ _____)	2,319,995
c	DEER VALLEY MUSIC FESTIVAL-THIS YEAR THE FESTIVAL HAD AN ESTIMATED AUDIENCE OF 31,000	
	(Grants and allocations \$ _____)	855,383
d		
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services).	15,510,958

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

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash—non-interest-bearing . . . . .	988,513	45	759,435
	46 Savings and temporary cash investments . . . . .		46	
	47a Accounts receivable . . . . .	2,116,491		
	b Less: allowance for doubtful accounts . . . . .		47c	2,116,491
	48a Pledges receivable . . . . .	2,638,833		
	b Less: allowance for doubtful accounts . . . . .	131,759	48c	2,507,074
	49 Grants receivable . . . . .		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		50	
	51a Other notes and loans receivable (attach schedule) . . . . .			
	b Less: allowance for doubtful accounts . . . . .		51c	
	52 Inventories for sale or use . . . . .		52	
	53 Prepaid expenses and deferred charges . . . . .	267,360	53	492,123
	54 Investments—securities (attach schedule) <b>EXC</b> <input type="checkbox"/> Cost <input type="checkbox"/> FMV . . . . .	33,843,763	54	36,971,349
	55a Investments—land, buildings, and equipment: basis . . . . .			
	b Less: accumulated depreciation (attach schedule) . . . . .		55c	
56 Investments—other (attach schedule) <b>EXHIBIT C</b> . . . . .	68,248	56	68,248	
57a Land, buildings, and equipment: basis . . . . .	7,661,492			
b Less: accumulated depreciation (attach schedule) <b>EXHIBIT B</b> . . . . .	1,772,330	57c	5,889,162	
58 Other assets (describe <b>▶</b> ) . . . . .		58		
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74) . . . . .	49,544,798	59	48,803,882	
<b>Liabilities</b>	60 Accounts payable and accrued expenses . . . . .	1,380,493	60	1,398,633
	61 Grants payable . . . . .		61	
	62 Deferred revenue . . . . .	1,463,829	62	1,640,126
	63 Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		63	
	64a Tax-exempt bond liabilities (attach schedule) . . . . .		64a	
	b Mortgages and other notes payable (attach schedule) <b>EXHIBIT D</b> . . . . .	556,692	64b	541,728
	65 Other liabilities (describe <b>▶</b> ) . . . . .	1,433,447	65	1,800,000
66 <b>Total liabilities</b> (add lines 60 through 65) . . . . .	4,834,461	66	5,380,487	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted . . . . .	9,091,710	67	9,036,168
	68 Temporarily restricted . . . . .	7,538,150	68	3,940,880
	69 Permanently restricted . . . . .	28,080,477	69	30,446,347
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds . . . . .		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund . . . . .		71	
	72 Retained earnings, endowment, accumulated income, or other funds . . . . .		72	
	73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) . . . . .	44,710,337	73	43,423,395
	74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73) . . . . .	49,544,798	74	48,803,882

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A**      **Reconciliation of Revenue per Audited  
Financial Statements with Revenue per  
Return (See page 27 of the instructions.)**

a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	19,135,273
b	Amounts included on line a but not on line 12, Form 990:		
	(1) Net unrealized gains on investments . . . \$ _____		
	(2) Donated services and use of facilities \$ 1,394,710		
	(3) Recoveries of prior year grants . . . \$ _____		
	(4) Other (specify): EXHIBIT A _____ \$ (971,291)		
	Add amounts on lines (1) through (4) ▶	b	423,419
c	Line a minus line b . . . . . ▶	c	18,711,854
d	Amounts included on line 12, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990. . . \$ _____		
	(2) Other (specify): _____ _____ \$ _____		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d). . . . . ▶	e	18,711,854

<b>Part IV-B</b>	<b>Reconciliation of Expenses per Audited Financial Statements with Expenses per Return</b>
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a	Total expenses and losses per audited financial statements . . . ▶	a	20,422,215
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$ 1,394,710		
(2)	Prior year adjustments reported on line 20, Form 990 . . . . . \$		
(3)	Losses reported on line 20, Form 990 . . . . . \$		
(4)	Other (specify): EXHIBIT A ..... \$ 260,109		
	Add amounts on lines (1) through (4) ▶	b	1,654,819
c	Line a minus line b . . . . . ▶	c	18,767,396
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . . . \$		
(2)	Other (specify): ..... ..... \$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) . . . . . ▶	e	18,767,396

**Part V** List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

[illegible]

**75** Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? **►** ☐ Yes ☒ No  
If "Yes," attach schedule—see page 28 of the instructions.

**Part VI Other Information** (See page 28 of the instructions.)

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76		✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes.	77		✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		✓
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	78b		✓
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . .	80a		✓
b	If "Yes," enter the name of the organization ▶ . . . . . . . . . . and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.			
81a	Enter direct and indirect political expenditures. See line 81 instructions <b>81a</b>			
b	Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	81b		
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . . . .	82a	✓	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) <b>82b</b> 1,394,710			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✓	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . .	83b	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	84a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	84b		✓
85	<b>501(c)(4), (5), or (6) organizations.</b> a Were substantially all dues nondeductible by members? . . . . .	85a		✓
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . . If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b		✓
c	Dues, assessments, and similar amounts from members. . . . . <b>85c</b>			
d	Section 162(e) lobbying and political expenditures . . . . . <b>85d</b>			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . . <b>85e</b>			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . . <b>85f</b>			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	85g		✓
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . . . .	85h		✓
86	<b>501(c)(7) orgs.</b> Enter: a Initiation fees and capital contributions included on line 12. <b>86a</b>			
b	Gross receipts, included on line 12, for public use of club facilities . . . . . <b>86b</b>			
87	<b>501(c)(12) orgs.</b> Enter: a Gross income from members or shareholders . . . . . <b>87a</b>			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . <b>87b</b>			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . . . .	88		✓
89a	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	<b>501(c)(3) and 501(c)(4) orgs.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction . . . . .	89b		✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization . . . . . ▶			
90a	List the states with which a copy of this return is filed ▶ <b>None Required</b>			
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) <b>90b</b> 192			
91	The books are in care of ▶ <b>Steve Hogan</b> Telephone no. ▶ ( <b>801</b> ) <b>869-9057</b> Located at ▶ <b>336 North 400 West, Salt Lake City, UT</b> ZIP + 4 ▶ <b>84103</b>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here. . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>92</b>			

**Part VII Analysis of Income-Producing Activities** (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93	Program service revenue:					
a	<b>CONCERT &amp; PERFORMANCE REVENUE</b>					4,125,773
b						
c						
d						
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments					
96	Dividends and interest from securities			14	98,153	
97	Net rental income or (loss) from real estate:					
a	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					296,476
99	Other investment income			18	1,673,830	
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a <b>OTHER</b>					177,790
b						
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))				1,771,983	4,600,039
105	Total (add line 104, columns (B), (D), and (E))					6,372,022

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

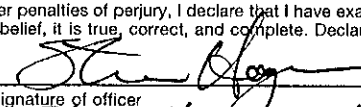
Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a, 98	PERFORMANCE AND RENTALS BRING HIGH QUALITY SYMPHONY & OPERA TO THE PUBLIC AND EDUCATIONAL INSTITUTIONS.
103a	VARIOUS MARKETING AND FUNDRAISING PROJECTS SUCH AS CONCESSIONS SALES, DINNERS, ETC. PROMOTES THE VISIBILITY OF THE SYMPHONY & OPERA IN THE COMMUNITY.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		Date <u>4/11/06</u>	
Paid Preparer's Use Only	Type or print name and title <u>Steve Hogan Director of Finance</u>			
	Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. W) EIN <u>          </u> Phone no. <u>          </u>

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

Department of the Treasury  
Internal Revenue Service

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

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

Supplementary Information—(See separate instructions.)

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

OMB No. 1545-0047

**2004**

Name of the organization

UTAH SYMPHONY & OPERA

Employer identification number

51:0145980

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
RALPH MATSON 1292 FED HEIGHTS DR, SLC, UT 84103	CONCERT MASTER 40+HRS/WEEK	141644	4618	0
CRAIG FINESHRIBER 7641 SOUTH QUICKSILVER, SLC, UT 84121	MUSICIAN 40+HRS/WEEK	91762	4618	0
LLEWELLYN HUMPHREYS 380 E STREET, SLC, UT 84103	MUSICIAN/PER MGR 40+HRS/WEEK	91065	4618	0
NICK NORTON 1208 HARVARD, SLC, UT 84108	MUSICIAN 40+HRS/WEEK	86757	4618	0
LISA BRUEMMER 3930 PROSPECTOR DR, SLC, UT 84121	MUSICIAN/ASST PER 40+HRS/WEEK	83803	4618	0
Total number of other employees paid over \$50,000 . . . . .	93			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
ISOLE, INC. 1032 COUNTRY CLUB RD, BREVARD, NC 28712	SYMPHONY CONDUCTOR MUSIC DIRECTOR	245000
ICM ARTISTS, LTD 40 WEST 57TH ST, NY, NY 10019	ARTISTS	77000
ICM ARTISTS, LTD 40 WEST 57TH ST, NY, NY 10019	ARTISTS	70000
COLUMBIA ARTIST MGMNT 165 WEST 57TH ST, NY, NY, 10019	ARTIST	50000
Total number of others receiving over \$50,000 for professional services . . . . .	0	



**Part III** Statements About Activities (See page 2 of the instructions.)

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ <u>0</u> (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.)		<input checked="" type="checkbox"/>
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b> Sale, exchange, or leasing of property?	<b>2a</b>	<input checked="" type="checkbox"/>
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>	<input checked="" type="checkbox"/>
<b>c</b> Furnishing of goods, services, or facilities?	<b>2c</b>	<input checked="" type="checkbox"/>
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<b>2d</b>	<input checked="" type="checkbox"/>
<b>e</b> Transfer of any part of its income or assets?	<b>2e</b>	<input checked="" type="checkbox"/>
<b>3a</b> Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	<b>3a</b>	<input checked="" type="checkbox"/>
<b>b</b> Do you have a section 403(b) annuity plan for your employees?	<b>3b</b>	<input checked="" type="checkbox"/>
<b>4a</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	<b>4a</b>	<input checked="" type="checkbox"/>
<b>b</b> Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>4b</b>	<input checked="" type="checkbox"/>

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► .....
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** ☐ An organization that normally receives: (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

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

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.***Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. **EXHIBIT G**

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	9252518	10817889	4290024	6516344	30876775
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	2234997	4781668	1193848	1346822	9557335
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1640728	1701516	(97566)	295648	3540326
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	120956	132674			253630
<b>23</b> Total of lines 15 through 22	13249199	17433747	5386306	8158814	44228066
<b>24</b> Line 23 minus line 17	11014202	12652079	4192458	6811992	34670731
<b>25</b> Enter 1% of line 23	132492	174337	53863	81588	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					26a 693415
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 6549409
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 34670731
d Add: Amounts from column (e) for lines: 18 3540326 19 0					
22 253630 26b 6549409					26d 10343365
e Public support (line 26c minus line 26d total)					26e 24327366
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 70 %
<b>27 Organizations described on line 12:</b> a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2003) (2002) (2001) (2000)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2003) (2002) (2001) (2000)					
c Add: Amounts from column (e) for lines: 15 16					
17 20 21					27c
d Add: Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

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

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ..... ..... .....	31	
32 Does the organization maintain the following:	32a	
a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ..... .....		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? . . . . .	33a	
b Admissions policies? . . . . .	33b	
c Employment of faculty or administrative staff? . . . . .	33c	
d Scholarships or other financial assistance? . . . . .	33d	
e Educational policies? . . . . .	33e	
f Use of facilities? . . . . .	33f	
g Athletic programs? . . . . .	33g	
h Other extracurricular activities? . . . . .	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ..... .....		
34a Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	34a	
b Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check ☒ a ☐ if the organization belongs to an affiliated group. Check ☐ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	37	
38	Total lobbying expenditures (add lines 36 and 37) . . . . .	38	
39	Other exempt purpose expenditures . . . . .	39	
40	Total exempt purpose expenditures (add lines 38 and 39) . . . . .	40	
41	Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is—      The lobbying nontaxable amount is— Not over \$500,000 . . . . . 20% of the amount on line 40 . . . . . Over \$500,000 but not over \$1,000,000 . . . . . \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 . . . . . \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 . . . . . \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 . . . . . \$1,000,000 . . . . .	41	
42	Grassroots nontaxable amount (enter 25% of line 41) . . . . .	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36. . . . .	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38. . . . .	44	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount . . . . .					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures . . . . .					
48 Grassroots nontaxable amount . . . . .					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures . . . . .					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers . . . . .			
b Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .			
c Media advertisements . . . . .			
d Mailings to members, legislators, or the public . . . . .			
e Publications, or published or broadcast statements . . . . .			
f Grants to other organizations for lobbying purposes . . . . .			
g Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
i Total lobbying expenditures (Add lines c through h.) . . . . .			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

**Part VII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? \_\_\_\_\_

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

**b Other transactions:**

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

**c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**

d. If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

[illegible]

**52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ►

b If "Yes," complete the following schedule:

☐ Yes ☒ No

☒ No[illegible]

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Supplementary Information for  
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

**2004**

Name of organization

UTAH SYMPHONY & OPERA

Employer identification number

51 0145980

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)

**General Rule—**

- ☐ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules—**

- ☒ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) . . . . . ▶ \$ \_\_\_\_\_

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
UTAH SYMPHONY & OPERA

Employer identification number  
51-0145980

**Part I** Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	GEORGE & DELORES ECCLES FOUNDATION 79 S. MAIN STREET, 12TH FLOOR SALT LAKE CITY, UT 84111	\$ 597625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>2</u>	GEORGE & DELORES ECCLES FOUNDATION 79 S. MAIN STREET, 12TH FLOOR SALT LAKE CITY, UT 84111	\$ 377375	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>3</u>	JAMES R. SWARTZ PO BOX 2816 PARK CITY, UT 84060	\$ 301300	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>4</u>	JACQUELYN WENTZ 44 W. BROADWAY #1005S SALT LAKE CITY, UT 84101	\$ 33070	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>5</u>	JACQUELYN WENTZ 44 W. BROADWAY #1005S SALT LAKE CITY, UT 84101	\$ 281580	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>6</u>	UBS FINANCIAL SERVICES 299 SOUTH MAIN STREET, SUITE 2275 SALT LAKE CITY, UT 84111	\$ 250266	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

**Part I** Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	UBS FINANCIAL SERVICES 299 SOUTH MAIN STREET, SUITE 2275 SALT LAKE CITY, UT 84111	\$ 100000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

UTAH SYMPHONY &amp; OPERA

Employer identification number

51 0145980

**Part II** Noncash Property (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>2</u>	11365 SHARES OF GENERAL ELECTRIC ..... ..... .....	\$ 377375	08 / 30 / 05
<u>5</u>	6000 SHARES OF USANA ..... ..... .....	\$ 281580	04 / 19 / 05
<u>7</u>	LISTING OF SYMPHONY & OPERA ON THEIR ADVERTISING DOCUMENTS ..... ..... .....	\$ 100000	09 / 01 / 04
—	..... ..... ..... .....	\$ .....	..... / ..... / .....
—	..... ..... ..... .....	\$ .....	..... / ..... / .....
—	..... ..... ..... .....	\$ .....	..... / ..... / .....

	<u>Part I, Line 20</u>	<u>Part IV-A</u> b 4 Revenues	<u>Part IV-B</u> b 4 Expenses
Interest & Dividends on Endowment	599,524	599,524	
Realized & Unrealized Gains/Losses	4,700,628	4,700,628	
Contribution to Endowment	(1,409,570)	(1,409,570)	
Contributions for Future Use	1,212,102	1,212,102	
Release of Prior Contributions	(4,848,100)	(4,848,100)	
Endowment Investment Expenses	(256,785)		256,785
Allowance for Bad Debts on Endowment	(3,324)		3,324
5% Draw	(1,225,875)	(1,225,875)	
	<u>(1,231,400)</u>	<u>(971,291)</u>	<u>260,109</u>

PART II, LINE 42-DEPRECIATION

	Current Depreciation	B. Program Services	C. Management and General
Office Equipment	\$ 25,728		\$ 25,728
Vehicles	\$ 15,245	\$ 15,245	
Symphony Hall Equipment	\$ 68,373	\$ 68,373	
Building	\$ 193,009		\$ 193,009
Equipment	\$ 126,953	\$ 82,237	\$ 44,716
Land	\$ -		
Construction in Progress	\$ 1,701		\$ 1,701
Subtotal	<u>\$ 431,009</u>	<u>\$ 165,855</u>	<u>\$ 265,154</u>

PART IV, LINE 57-FIXED ASSETS

	Cost	Accumulated Depreciation	Book Value
Office Equipment	\$ 385,979	\$ 76,967	\$ 309,012
Vehicles	\$ 76,227	\$ 47,470	\$ 28,757
Symphony Hall Equipment	\$ 396,628	\$ 193,406	\$ 203,222
Building	\$ 5,505,869	\$ 799,869	\$ 4,706,000
Equipment	\$ 1,027,784	\$ 652,066	\$ 375,718
Land	\$ 229,500	\$ -	\$ 229,500
Construction in Progress	\$ 39,505	\$ 2,552	\$ 36,953
Subtotal	<u>\$ 7,661,492</u>	<u>\$ 1,772,330</u>	<u>\$ 5,889,162</u>

PART IV, LINES 54, 56 - INVESTMENTS

	Beginning of Year	End of Year
Line 54, Investments--Securities		
Government Bonds	\$ 6,347,472	\$ 5,770,231
Corporate Bonds	\$ 2,468,935	\$ 3,076,907
Corporate Stocks	\$ 24,195,431	\$ 25,842,438
Hedge Funds	\$ -	\$ 1,778,933
Instrument Loans	\$ 112,646	\$ 101,966
Money Market	\$ 719,279	\$ 400,874
	<u>\$ 33,843,763</u>	<u>\$ 36,971,349</u>
Line 56, Investments--Other		
Real Estate	\$ 17,400	\$ 17,400
Paintings and Art	\$ 50,848	\$ 50,848
	<u>\$ 68,248</u>	<u>\$ 68,248</u>

PART IV, LINE 64b - MORTGAGES

	Beginning of Year	End of Year
Line 64b--Mortgages		
RDA of Salt Lake	\$ 500,000	\$ 500,000
Great American-Phone Lease	\$ 56,692	\$ 41,728
	<u>\$ 556,692</u>	<u>\$ 541,728</u>

UTAH SYMPHONY OPERA  
51-0145980  
2004 FORM 990  
PART V, Officers, Directors, and Trustees

EXHIBIT E

Name and Address	Title & Time Devoted to Position	Compensation	Contr to Employee Benefit Plans	Expense Accounts and Other Allowance
Anne Ewers 1338 S 1700 E Salt Lake City, UT 84108	CEO 40+ hrs per week	\$180,250	\$14,420	\$4,550
David Green 2717 S Grandview Circle Salt Lake City, UT 84106	COO 40+ hrs per week	\$90,000	\$8,100	\$0
Herbert Livsey PO Box 45385 Salt Lake City, UT 84145	Former Chairman 5 hrs per week	\$0	\$0	\$0
G. Frank Joklik 60 E South Temple Ste 1225 Salt Lake City, UT 84111	Chairman of the Board 5 hrs per week	\$0	\$0	\$0
Patricia Richards 299 S Main Street, 7th Floor Salt Lake City, UT 84111	Vice-Chair 5 hrs per week	\$0	\$0	\$0
Dwayne Liddell 50 E North Temple, Floor 18 Salt Lake City, UT 84150	Director 10 hrs per week	\$0	\$0	\$0
Joseph Anderson 4394 Adonis Drive Salt Lake City, UT 84124	Director 5 hrs per week	\$0	\$0	\$0
Edward Ashwood 500 Chipeta Way Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
William Bailey 1825 S 3730 W Salt Lake City, UT 84104	Director 5 hrs per week	\$0	\$0	\$0
Ronald Beck 675 E 500 S Ste 600 Salt Lake City, UT 84102	Director 5 hrs per week	\$0	\$0	\$0
Bonnie Beesley 1492 Kristianna Circle Salt Lake City, UT 84103	Director 5 hrs per week	\$0	\$0	\$0
Thomas Bennett 201 S Main Street Ste 600 Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Kirk Benson 10653 S River Front Parkway South Jordan, UT 84095	Director 5 hrs per week	\$0	\$0	\$0

UTAH SYMPHONY OPERA  
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EXHIBIT E

Name and Address	Title & Time Devoted to Position	Compensation	Contr to Employee Benefit Plans	Expense Accounts and Other Allowance
David Carlebach 295 Chipeta Way, 4th Floor Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
Roger Carter 1085 Alton Way Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
Bruce Christensen 55 N 300 W Salt Lake City, UT 84180	Director 5 hrs per week	\$0	\$0	\$0
Howard Clark 2725 E Parleys Way Ste 120 Salt Lake City, UT 84109	Director 5 hrs per week	\$0	\$0	\$0
Aileen Clyde 908 Hillcrest Drive Springville, UT 84663	Director 5 hrs per week	\$0	\$0	\$0
Kay Cornaby 170 S Main Street Ste 1500 Salt Lake City, UT 84101	Director 5 hrs per week	\$0	\$0	\$0
Deedee Corradini 2539 Fairway Village Dr Park City, UT 84060	Director 5 hrs per week	\$0	\$0	\$0
John D'Arcy 1 S Main Street, 2nd Floor Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Raymond Dardano 299 S Main Street Ste 2275 Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Peter Dawson 1425 W 2675 N Ogden, UT 84404	Director 5 hrs per week	\$0	\$0	\$0
Geralyn Dreyfous 2233 Fardown Avenue Salt Lake City, UT 84121	Director 5 hrs per week	\$0	\$0	\$0
Lisa Eccles 79 S Main Street, 12th Floor Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Jerry Fenn 250 Bell Plaza Ste 1614 Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0

## UTAH SYMPHONY OPERA

EXHIBIT E

51-0145980

2004 FORM 990

## PART V, Officers, Directors, and Trustees

Name and Address	Title & Time Devoted to Position	Compensation	Contr to Employee Benefit Plans	Expense Accounts and Other Allowance
Edwin Firmage 332 S 1400 E Salt Lake City, UT 84112	Director 5 hrs per week	\$0	\$0	\$0
Kristen Fletcher 355 Hollyhock Street Park City, UT 84098	Director 5 hrs per week	\$0	\$0	\$0
Calvin Gaddis 2079 Sierra Ridge Court Salt Lake City, UT 84109	Director 5 hrs per week	\$0	\$0	\$0
Burton Gordon 1431 N Astor Street Chicago, IL 60610	Director 5 hrs per week	\$0	\$0	\$0
Pat Hales 2460 East Hills Cr Sandy, UT 84093	Director 5 hrs per week	\$0	\$0	\$0
Richard Horne PO Box 58477 Salt Lake City, UT 84158	Director 5 hrs per week	\$0	\$0	\$0
Jon Huntsman Jr. 500 Huntsman Way Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
Jon Huntsman Sr. 3049 Sherwood Circle Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
Dan Johnson 2341 N 1100 W Salt Lake City, UT 84116	Director 5 hrs per week	\$0	\$0	\$0
Clark Jones 9717 S Ruskin Circle Sandy, UT 84092	Director 5 hrs per week	\$0	\$0	\$0
Michael Keyes 8149 S 2475 E South Weber UT 84405	Director 5 hrs per week	\$0	\$0	\$0
Edward Moreton 709 E South Temple Salt Lake City, UT 84102	Director 5 hrs per week	\$0	\$0	\$0
David Mortensen 1430 E Presidents Cr Room 220 Salt Lake City, UT 84112	Director 5 hrs per week	\$0	\$0	\$0



UTAH SYMPHONY OPERA  
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EXHIBIT E

Name and Address	Title & Time Devoted to Position	Compensation	Contr to Employee Benefit Plans	Expense Accounts and Other Allowance
Terrell Nagata 242 S 400 E Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
William Nelson 36 S State St, 22nd Floor Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Claudia Norton 1208 Harvard Ave Salt Lake City, UT 84105	Director 5 hrs per week	\$0	\$0	\$0
Gary Ofenloch 1364 E Perry's Hollow Drive Salt Lake City, UT 84103	Director 5 hrs per week	\$0	\$0	\$0
Don Ostler 2892 Kennedy Drive Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
Scott Parker 757 S Woodmoor Circle Bountiful, UT 84010	Director 5 hrs per week	\$0	\$0	\$0
Dinesh Patel 2795 E Cottonwood Pkwy Ste 360 Salt Lake City, UT 84122	Director 5 hrs per week	\$0	\$0	\$0
Chase Peterson 66 Thaynes Canyon Drive Park City, UT 84060	Director 5 hrs per week	\$0	\$0	\$0
Frank Pignanelli 60 S 600 E Ste 150 Salt Lake City, UT 84102	Director 5 hrs per week	\$0	\$0	\$0
Joanne Shiebler 7905 Woodland View Drive Park City, UT 84060	Director 5 hrs per week	\$0	\$0	\$0
Harris Simmons 1 S Main Street Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Jeffery Smith 6405 S 3000 E Salt Lake City, UT 84121	Director 5 hrs per week	\$0	\$0	\$0
George Speciale 39 Exchange Place Ste 200 Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0

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EXHIBIT E

Name and Address	Title & Time Devoted to Position	Compensation	Contr to Employee Benefit Plans	Expense Accounts and Other Allowance
Verl Topham 847 Juniperpoint Dr. Salt Lake City, UT 84103	Director 5 hrs per week	\$0	\$0	\$0
Jim Wall 30 E 100 S Salt Lake City, UT 84111	Director 5 hrs per week	\$0	\$0	\$0
Walker Wallace 2230 E Parleys Terrace Salt Lake City, UT 84109	Director 5 hrs per week	\$0	\$0	\$0
John Williams 48 Market Street Ste 250 Salt Lake City, UT 84101	Director 5 hrs per week	\$0	\$0	\$0
Connie Wimer 1768 Navajo Drive Ogden, Ut 84403	Director 5 hrs per week	\$0	\$0	\$0
David Winder 490 - 16th Avenue Salt Lake City, UT 84103	Director 5 hrs per week	\$0	\$0	\$0
Anne-Marie Wright 1160 Bonneville Drive Salt Lake City, UT 84108	Director 5 hrs per week	\$0	\$0	\$0
Jeffrey Wright 159 W Broadway Ste 200 Salt Lake City, UT 84101	Director 5 hrs per week	\$0	\$0	\$0

Line 43b - Expenses	(C) Management & General			
	(A) Total	(B) Program	(D) Fundraising	
Donor Cultivation	\$ 139,954	\$ -	\$ -	\$ 139,954
Marketing	1,235,326	1,235,326	-	-
Guild expenses	240,933	-	-	240,933
Conductor	28,567	28,567	-	-
Stage/Lighting	56,038	56,038	-	-
Sound	81,799	81,799	-	-
Stagehands	33,171	33,171	-	-
Guest Artists	1,192,968	1,192,968	-	-
Music Purchases/Rental/Royalties	116,663	116,663	-	-
Box Office	95,852	95,852	-	-
Opera Artistic	945,110	945,110	-	-
Costume Shop	125,069	125,069	-	-
Production Expenses	40,743	40,743	-	-
Education	48,745	48,745	-	-
Other Program	132,031	132,031	-	-
Miscellaneous	293,822	10,398	283,424	-
Set/Scenery	212,282	212,282	-	-
	<u>\$ 5,019,073</u>	<u>\$ 4,354,762</u>	<u>\$ 283,424</u>	<u>\$ 380,887</u>

2004 FORM 990 SCHEDULE A, SUPPORT TEST - SCH. A, PART IV-A

	<u>2003</u>
Line 15 - Gifts, Grants and Contributions Received	10,237,323
Beg. Pledge Receivable	4,269,350
End. Pledge Receivable	<u>(5,254,155)</u>
Cash Basis	<u>9,252,518</u>
Line 17 - Program Revenue	3,677,801
Beg. Accounts Receivable	1,376,018
Ending Accounts Receivable	<u>(2,818,822)</u>
Cash Basis	<u>2,234,997</u>
Line 18 - 990, Line 5 -- Dividends	91,694
990, Line 6 -- Gross Rents	305,434
990, Line 7 -- Other Investment Income	<u>1,243,600</u>
Cash Basis	<u>1,640,728</u>
Line 22 - Other -- 990, Line 11	<u>120,956</u>