Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

			"	ider decitor obitor,	benefit tru	st or private fou	ndation))	noope bia	OK ILING	Open to P	ublic
		of the Treasury enue Service	│ ▶ 1	The organization may	have to use a c	copy of this return	to satis	sfy state rep	oorting req	uirements.	Inspecti	
A	For ti	he 2009 ca	lendar	year, or tax year b	ginning	09/01 ,	2009, a	nd ending	0	8/31	, 20 10	
В	check if	applicable:	Please	C Name of organization	n UTAH SYMP	PHONY & OPER	₹A			D Employ	yer identification	number
			use IRS label or	Doing Business As	UTAH SYMPH	<u>IONY I UTAH O</u>	PERA			51	01459	80
		change	print or type.	Number and street (or	P.O. box if mail is not	delivered to street add	ress)	Room/suite		E Teleph	one number	
	nitiai re		See	123 WEST SOUT	'H TEMPLE					(801)	533-56	26
	ermina		Specific instruc-	City or town, state	•	+ 4						
		ed return	tions.	SALT LAKE CIT	 					G Gross re	ocelpts \$ 17,1	75,904
	pplicati	ion pending	F Nan	ne and address of princ	ipal officer: Mel	ia Tourangeau			H(a) Is this	s a group return	n for affiliates?□Yes	s ☑No
			123 W	/ South Temple, S					i		included? Tyes	Lands.
	****	cempt status:		501(c) (3)◀ (Insert no	o.) 🔲 4947(a)(1)	or 🗌 527			lf "N	lo," attach a	ı list. (see Instructi	ons)
		ite: ► WV	****	The second secon						exemption nu		
				oration 🔲 Trust 🔲 Asso	ciation L. Other 🕨	<u> </u>	L Year	r of formation	1975	M State o	f legal domicile: (JT
Pa	rt I		*****		·····							
	1	Briefly de	scribe	the organization's	mission or mo	ost significant a	ctivities	'			nances which	· • • • • •
ø				te and enrich the			on - W	e are a De	stination	Organiza	ation; Values	
anc.		Excellen	ce, Int	egrity, Trust and	Communication	on	~~~~					
& Governance												
Š	2	Check this	box ►	if the organization	discontinued its op	erations or dispose	d of more	e than 25% o	f its net ass	1 1	•	
જ	3			ng members of the						. 3		39
ije.	4			pendent voting me		governing body	(Part V	/I, line 1b)		. 4		37
Activities	5			f employees (Part	•					. 5	 	435
¥	i .			f volunteers (estim						. 6		388
		Total gros			. 7a		<u>0</u>					
	<u> </u>	Net unrei	ated b	usiness taxable in	come from For	m 990-1, line 34	! , , ,	· · · · · ·	Prior Y	, 7b	Current Ye	
	_		_					<u> </u>				
9	l _			nd grants (Part VII	•				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,443,505		62,491
Revenue	9	-		revenue (Part VII				L	,	,124,204 ,604,851		320,636 357,368
ě				me (Part VIII, colu					<u></u>	336,782		305,367
			er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				18	,509,342	**************************************	145,862		
								 	10,	0	17,0	10,002
				ilar amounts paid			• •	· · · 		0		
8	14			or for members (: : -	11	,565,333	11.0	63,339
Expenses	l			ompensation, emplo			i, iines c)—10)		0	71,0	00,000
ភ				draising fees (Part		="	1,238,9	933 E				
	l		-	j expenses (Part IX, i (Part IX, column (1 1	•		********	6	,223,031	6.0	08,307
				. Add lines 13-17						,788,364		71,646
				penses, Subtract lir			-			720,978		-25,784
5 %									ginning of C		End of Ye	
St St	20	Total asse	ets (Pa	art X, line 16),					35	,711,580	34,9	45,731
Net Assets or Fund Balances	21			Part X, line 26)					4	,401,246	3,9	84,036
2 5	22	Net asset	s or fu	ınd balances, Sub	tract line 21 fro	om line 20			31	,310,334	30,9	61,695
Pa	irt II	Signa	ature	Block	·							
				f perjury, I declare that I								
		and belier	, it is tit	is, correct, and comple	te. Deciaration of p	reparer (outer trial)	onicer, is	Dased On all	I	i or wiscii pi	eparer mas any m	iowicaya,
Sig												
He	re		ture of						Da	te		
				Martin, Controlle	·		····					
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		Preparer's					Date	Chec self-		Preparer's i	identifying number tionsi	
Paid	l	signature								,		
	arer's	3	mo for c	ALIFA I		······································	<u> </u>			L.,,,,,,,,,		
	Only	if self-emp	oloyed),	<u> </u>		 		· · · · · · · · · · · · · · · · · · ·	EIN	<u> </u>	<u> </u>	·····
	<u> </u>	address, a		+ 4 7					Phone r	ю. ▶ ()	

Yes No

Fa	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: Mission - To give performances which engage, educate and enrich the lives of our community; Vision - We are a Destination Organization; Values - Excellence, Integrity, Trust and Communication

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	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 8,921,928 including grants of \$ 0) (Revenue \$ 2,684,752) Code 711130 SYMPHONIC CONCERTS - One of only 18 52-week orchestras in the United States, the Utah
	Symphony presents over 200 concerts at Abravanel Hall and in communities throughout Utah, reaching
	approximately 103,557 during 2010. 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. Our extensive education programs through the symphony and the opera are offered to every
	school district in Utah during a three- to five-year rotation and provide opportunities to explore and share the
	emotion and expressiveness of symphonic music. Over 170,000 students and 8,000 educators benefit from
	these programs. Please see www.utahsymphony.org for more information.
	these programs, riease see www.utansymphony.org for more information.

	/O
4b	(Code:) (Expenses \$ 1,945,427 including grants of \$ 0) (Revenue \$ 863,552)
	Code 711110 OPERA PERFORMANCES - Our operas are performed at the Capitol Theatre, reaching an
	audience of an estimated 26,217 in 2010. Utah Opera offers 20 performances of four mainstage productions
	each year, has a nationally-renowned costume shop, and features some of the top singer, directors, conductors
	and designers from around the country. A Young 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 www.utahsymphony.org for more information.
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4c	(Code:) (Expenses \$ 1,876,315 including grants of \$ 0) (Revenue \$ 750,981)
	Code 711130 DEER VALLEY MUSIC FESTIVAL - Currently in its seventh season, the Deer Valley Music
	Festival is the summer home of Utah Symphony Utah Opera, reaching an audience of an estimated 31,346.
	The festival provides chamber music, classical, family and pops offerings in four venues: the Deer Valley Snow
	Park Outdoor Amphitheater, St. Mary's Church, Temple Har Shalom, and salons in private Park City homes.
	Diagga and united by the boundary and for more information
	riedse see www.utansymphony.org for more imormation.

4d	Other program services. (Describe in Schedule O.) See Schedule O, Statement 1
	(Expenses \$ 1,551,950 including grants of \$ 0) (Revenue \$ 21,351)
4e	Total program service expenses ► 14,295,620

Pai	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	√	
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? If "Yes," complete Schedule C, Part II	4	1	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		√
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	✓	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	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.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	~	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
	Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		✓_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		✓
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? If "Yes," complete Schedule G, Part I	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?	4.		,
20	If "Yes," complete Schedule G, Part III	19 20		∀

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 and other assistance to individuals in the United States 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 25,	24a		√
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	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	28a 28b		√
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	√	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
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, Parts II, III, IV, and V, line 1	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	√	· · · ·

Fai	Statements Regarding Other IRS Fillings and Tax Compliance			,
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
c	milder than the second of the	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 435 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	100 4 100
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		√
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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: ▶ Cayman Islands			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
-	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, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
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?	6a		√
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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?	7a	1	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	√	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		V
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	<u>7g</u>		 √
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	✓	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the organization make any taxable distributions under section 4966?	9a		ļ
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII. line 12			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
29	amounts due or received from them.)	12a		
∠d h	If "Yes." enter the amount of tax-exempt interest received or accrued during the year	144		

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	✓	
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		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders? ,	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	✓	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ,	9a		✓_
	tion B. Policies (This Section B requests information about policies not required by the Inte	ernal		
Hev	enue Code.)		, , , ,	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	✓	
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	✓.	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	✓	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	\	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		,	
	rise to conflicts?	12b	✓	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40.	,	
	describe in Schedule O how this is done	12c	√	
13	Does the organization have a written whistleblower policy?	13 14	✓	
14	Does the organization have a written document retention and destruction policy?	14	Y	
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?	46-	\	
	The organization's CEO, Executive Director, or top management official	15a	_ <u>v</u>	7
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		√
	with a taxable entity during the year?	108		Y
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		2
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ► .UT			
18		1/2\^	ankil	
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or available for public inspection. Indicate how you make these available. Check all that apply.	<i>)</i> (3)8	orny)	
	✓ Own website ✓ Another's website ✓ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	aract	
13	policy, and financial statements available to the public.	VI 1118	51 55 L	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rde e	f tha	
ZU	Céana Hanan (001)060 0067			
	organization: ► Steve Hogan, 1001/3003-3007 336 North 400 West, Salt Lake City, UT 84103			

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. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not compensate any current officer, director, or trustee.										
(A)	(B)			(4	C)			(D)	(E)	(F)
Name and Title	Average	Positi	ion (d	chec	k all	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Edward Ashwood	1							0	0	0
Trustee	•	✓	<u> </u>				<u> </u>		·	····
Richard J Baringer	1	١.						0	0	0
Trustee		_	ļ	ļ	ļ					
Bonnie Beesley	1							o	0	0
Trustee		<u> </u>	ļ		ļ	ļ	ļ			
Kirk Benson	3	,						o	0	0
Trustee		_	 -			ļ				
Blaine L Carlton Trustee	2.5	1						0	0	0
Kathryn Carter	2							0	0	0
Trustee		√	_	-			-			
Howard Clark Trustee	2							0	0	0
James Clarke	······································						-		<u></u>	· · · · · · · · · · · · · · · · · · ·
Trustee	1	1	İ					0	0	0
Ganet Crocker		Υ					├			
Trustee	1	./						0	0	0
1 1 Ph.5 A							-			
John D'Arcy Trustee	3							0	0	0
Lisa Eccles		_	\vdash		 	ļ			· · · · · · · · · · · · · · · · · · ·	tili ja via talanta ta
Trustee	1	1						0	0	0
JI Chip Everest		<u>V</u>				·				
Trustee	1	1						0	0	0
Jerry Fenn		,								
Trustee	3	✓						0	0	0
Kristen Fletcher										
Trustee	3	√						0	0	0
Burton L Gordon	1									^
Trustee	I	✓						0	0	0
Jim Gulbrandsen	1							0	0	0
Trustee	'			Ĺ	L	<u> </u>	<u> </u>	0	<u> </u>	· · · · · · · · · · · · · · · · · · ·

Part VII Section A. Officers, Directors, Tru	istees, Key	/ Emp	loy	ees	, an	d Hig	hes	t Compensate	d Employees	(coi	ntinued)
(A)	(B)			(C)			(D)	(E)		(F)
Name and title	Average	Positi	ion (d	chec	k all	that ap	ply)	Reportable	Reportable		Estimated
	hours per	오동	7	Q	7	9 4	ਰ	compensation	compensatio		amount of
	week	율붗	葦	Officer	e e	홍윤	Former	from the	from related organization		other compensation
		충률	Institutional	*	Key employee) \$ £	4	organization	(W-2/1099-MI		from the
		₹ ₹	125		ş	l " ğ		(W-2/1099-MISC)			organization and related
		Individual trustee or director	trustee		ď	Highest compensated employee			•		organizations
		*	8			🕸				l	
Alan Hall		ļ			_	<u> </u>	├		····		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	1							0		0	0
Trustee		<b>✓</b>	<u> </u>	<u> </u>	<u> </u>		ļ		·····		
Richard Horne	3							o		٥	0
Trustee		<u> </u>	<u> </u>	<u> </u>	_						
Josh James	1				ĺ			0		0	0
Trustee		<b>✓</b>						U			
Dan Johnson	1							_			
Trustee	T.	<b>/</b>						0		0	0
Lee Livingood											
Trustee	3	/						65,735		0	0
Peter Margulies		····	<del> </del>	· · · · ·							
Trustee	3	./		Ì				58,509	•	0	0
R David McMillan		<u>Y</u>					<del> </del>		<del></del>	$\rightarrow$	
Trustee	1	/						0		0	0
Edward Moreton		Υ	-		_	<b></b>	-				
Trustee	0.5							0		0	0
Dinesh Patel		<b>✓</b>	<del> </del>						***************************************		
***************************************	1							o		0	0
Trustee		✓	<u> </u>	<u> </u>	<u> </u>	<u> </u>					
Frank Pignanelli	1							اه		0	0
Trustee	•	✓		_					********		· · · · · · · · · · · · · · · · · · ·
Marcia Price	1							اه		0	0
Trustee	*	✓	<u> </u>	<u> </u>	<u> </u>			0			
Mark Prothro	1							o		اه	0
Trustee	1	✓			l		:	J		. "	U
Continued On Schedule J2											
1b Total , , , , , , , , , , , , , , , , , , ,			,		,	•	•	610,357		0	. 0
2 Total number of individuals (including but i	not limited	to the	ose	liste	ed a	above	) w	no received mo	ore than \$10	0.00	0 in
reportable compensation from the organiza							,		• • • • • • • • • • • • • • • • • • • •	-,	
	· · · · · · · · · · · · · · · · · · ·										Yes No
O Did the consciontion list our fewers office		4								. [	
3 Did the organization list any former office							-		•	- t	3
employee on line 1a? If "Yes," complete S							• •			- 1	
4 For any individual listed on line 1a, is the s											
the organization and related organizations	greater tha	n \$15	50,0	00?	If "	Yes,"	cor	nplete Schedu	le J for such	!	
individual, , , , , , , , , , , , , , , , , , ,										}	4 /
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	comp	eņs	satio	n f	rom a	any	unrelated org	anization for	.	
	res, comp	иете з	Scn	eau	1 <del>0</del> J	tor s	ucn	person	<del></del>		5   √
Section B. Independent Contractors	······································	·								<del></del>	<del></del>
1 Complete this table for your five highest or	ompensate	d inde	epe	nde	nt c	contra	ictoi	rs that received	d more than	\$10	0,000 of
compensation from the organization.		<del></del>					,				
(A)								(B)	_	_	(C)
Name and business add	ress							Description of s	ervices		Compensation
Salt Lake County Center-Arts, 50 W 200 S, Salt Lake City, UT 84101 Building rent & Ticket sale 353,630											
Bonneville Intermountain Radio, PO Box 1160, Salt Lake City, UT 84110 Adverstising 232,105											
Artsmarketing Services, Dept 325, PO Box 8000, Buffalo, NY 14267 Telemarketing						216,551					
								161,549			
							l				······································
2 Total number of independent contractors (in	ncludina bi	ıt not	lim	ited	to t	hose	lieta	ad above) who	received		
more than \$100,000 in compensation from	the organ	izatio	n 🏲	0				455 70, 11110			

Part	: VIII	Statement of Re	venue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns		1a	0				
뚫릴	b	•		1b	0		27 SERVER SERVER (2012)		0.6 0.6 0.6
ਦੂ <u>ਦ</u>		•		1c	0				
[말전	d	•		1d 1e	3,374,111	919 (519) (519)	4.5.0053	0.019.01.03.2	
Si is	6	Government grants (contri	•	16	3,374,111	CONTRACTOR OF SELECT	42/8/8/2015/6/3		(2) (1) (2) (4) (4) (4) (4)
[독본	•	All other contributions, gifts, g and similar amounts not include		1f	7,388,380			Selection of the select	
들위	а	Noncash contributions include			313,874	Description of the second			E 2 G 6 (6) (6)
රි සි		Total. Add lines 1a-1f				10,762,491			
e e					Business Code		and the second second		
ᄛ	2a	Concert & Performance			711130	3,457,084	3,457,084	0	(
e	b	Concert & Performance	e		711110	863,552	863,552	0	(
, <u>ğ</u>	C	*******************		4					
<u>8</u>	d			• • • •					
Tan	e	All other program service				0	0	0	
Program Service Revenue	q	Total. Add lines 2a-2f			<u> </u>	4,320,636	0	0	
	3	Investment income (incl				1,020,000			
	J	other similar amounts)				1,657,368	0	0	1,657,368
	4	Income from investment o				0	0	0	0
	5	Royalties			<b>&gt;</b>	0	0	0	0
			(i) Real		(ii) Personal				
	6a	Gross Rents	······································	0	403,797				
	b	Less: rental expenses	<del></del> .	0	130,042				
	_	Rental income or (loss)		0	273,755 ►	072 755	272 755		0
	d	Net rental income or (lo	(i) Securitie		<del> </del>	273,755	273,755	0	U
	7a	Gross amount from sales of assets other than inventory	(I) Securities	0	(ii) Other				
		Less: cost or other basis		<u>~</u>	<u> </u>				
	D	and sales expenses ,		0	0				
	c	Gain or (loss)		0	0				
					<b>&gt;</b>	0	0	0	C
စ္ခ	8a	Gross Income from	fundraisir	าต					
盲		events (not including \$				0.0000000		600 0000000000	
<u>ا ۾</u>		of contributions reported	d on line 1	c).					
Other Revenue	_	See Part IV, line 18			0	60.5550		2232555	
∄		Less: direct expenses Net income or (loss) fro				0	0	0	(
١		` .		_	vents, .	0	U	U	C
	9a	Gross income from gam			0				
	h	See Part IV, line 19 Less: direct expenses.			0				
		Net income or (loss) fro			ities ▶	0	0	0	C
	10a	Gross sales of inve	entory. le	ss					
ļ		returns and allowances			0	1640 (Constitution Charles			
		Less: cost of goods sol	ld	. b	0				
	С	Net income or (loss) fron		rvente		0	0	0	C
}		Miscellaneous Reve	enue		Business Code				
	11a					1			
	b				<del></del>				
	C	All other revenue				31,612	31,612	0	C
		All other revenue Total. Add lines 11a-11				31,612	THE CONTRACT OF THE PROPERTY O		
- 1	12	Total revenue. See ins	tructions	• •		17,045,862	1	0	1,657,368

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses						
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0								
4	Benefits paid to or for members	0	0								
5	Compensation of current officers, directors, trustees, and key employees	597,302	279,227	215,354	102,721						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0						
7	Other salaries and wages	8,432,857	7,672,201	266,449	494,207						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	210,775		0	0						
9	Other employee benefits	1,177,292		35,680	81,532						
10	Payroll taxes	645,113	586,923	20,383	37,807						
11	Fees for services (non-employees):	0	0	0	0						
	Management , , , , , , ,	0	0	0							
b	Legal	78,234	0	78,234	0						
	Accounting	5,515	0	0	5,515						
d	Lobbying	0,0.0		•	.0,0,0						
f	Investment management fees	0	0	0	0						
g	Other	0	0	0	0						
12	Advertising and promotion	0	0	Ō	0						
13	Office expenses	0	0	0	0						
14	Information technology	0	0	0	0						
15	Royalties	0	0	0	0						
16	Occupancy	333,891	272,082	52,662	9,147						
17	Travel	248,051	193,588	43,842	10,621						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings .	29,257	. 0	29,257	0						
20	Interest	15,001	0	15,001	0						
21	Payments to affiliates	0	0	0	0						
22	Depreciation, depletion, and amortization.	364,703			0						
23	Insurance	85,524	0	85,524	0						
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed										
	5% of total expenses shown on line 25 below.)										
a	Guest Artists	1,847,177	1,843,284		2,000						
b	Marketing/Cultivation	1,621,820	1,363,187	3,103	255,530						
C	Production  Conoral & Administrative	840,048	681,308 2,171	158,740 265,967	1 403						
d	General & Administrative Guild	269,541 269,545	2,171	265,967 31,095	1,403						
e		209,040	U	31,093	238,450						
25 26	All other expenses  Total functional expenses. Add lines 1 through 24f	17,071,646	14,295,620	1,537,093	1,238,933						
20	Joint costs. Check here ► ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation										

Part X **Balance Sheet** (A) (B) End of year Beginning of year 549,680 683,238 1 1 2 2 1,896,525 3 2,097,222 3 1,436,643 4 620,369 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 0 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 0 6 0 0 7 0 Notes and loans receivable, net . . . . . . . . . . . . . . . 0 0 8 8 Prepaid expenses and deferred charges . . . . Land, buildings, and equipment: cost or 10a 349,064 319,536 10a other basis. Complete Part VI of Schedule D 4,760,236 Less: accumulated depreciation . . . . 10b 3,623,246 5,122,265 10c 26,278,131 Investments—publicly traded securities . . . . . 11 26.389.640 11 6,900 12 6,900 12 Investments-other securities. See Part IV, line 11 72,372 13 68,590 13 Investments—program-related. See Part IV, line 11 . . . . . . . 0 14 14 Other assets. See Part IV, line 11 . . . . . . 0 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 35,711,580 34,945,731 16 Accounts payable and accrued expenses . . . . . . . . . . . . . . . . 1,039,066 17 1,217,645 17 18 18 1.677.023 19 1,601,702 19 0 20 0 20 0 21 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . . . . . . . . . 0 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 0 23 500,000 500,000 24 Unsecured notes and loans payable to unrelated third parties . . . 24 1,185,157 25 25 664,689 26 4,401,246 3,984,036 Balances complete lines 27 through 29, and lines 33 and 34. 7,182,964 7,157,180 27 27 2,963,296 2,476,958 28 28 Fund 21.164.074 21.327.557 29 Permanently restricted net assets , , , , , , , , , , , Organizations that do not follow SFAS 117, check here ▶ □ è and complete lines 30 through 34. Assets 30 Capital stock or trust principal, or current funds . . . . . . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds Set 30.961.695 Total net assets or fund balances . . . . . . . . . . . . . . . . . . 31,310,334 33 33 34 35,711,580 34,945,731

Pa	rt XI Financial Statements and Reporting							
			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," explain in							
	Schedule O.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a							
b	Were the organization's financial statements audited by an independent accountant?	2b	✓					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of							
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	_					
	If the organization changed either its oversight process or selection process during the tax year, explain in							
	Schedule O.							
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were							
	issued on a consolidated basis, separate basis, or both:							
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in							
	the Single Audit Act and OMB Circular A-133?	3a		<b>✓</b>				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			ĺ				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b						

Form **990** (2009)

## SCHEDULE A

(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047 Open to Public

Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number 0145980 **UTAH SYMPHONY & OPERA** Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/4 % 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 331/2 % 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🔲 Type I c Type III-Functionally integrated d Type III-Other **b** Type II e D By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? . . . . . . . . . . 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . Provide the following information about the supported organization(s). h (i) Name of supported (II) EIN (iii) Type of organization (Iv) is the organization (v) Did you notify (vi) is the (vii) Amount of organization in col. the organization in organization (described on lines 1-9) In col. (i) listed in your support governing document? (i) organized in the above or IRC section col. (i) of your U.S.? (see instructions)) support? Yes Yes Yes

Total

Schedule A (Form 990 or 990-EZ) 2009 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 10,805,093 11,757,157 10,140,937 12,443,505 10,762,491 55,909,183 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 0 0 0 its behalf . . . . . . . . . . The value of services or facilities furnished by a governmental unit to the 0 0 0 0 0 0 organization without charge 10,805,093 11,757,157 10,140,937 12,443,505 10,762,491 55,909,183 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included <u>s</u> 1 S 1

	publicly supported organization, included								
	on line 1 that exceeds 2% of the amount							6,606,947	
6	shown on line 11, column (f)	10111300030000000000		***************************************			ar and a second	49,302,236	
	tion B. Total Support							.,0,002,200	
	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e	2009	(f) Total	
7	Amounts from line 4	10,805,093	11,757,157	10,140,937	12,443,505	· · · · · ·	,762,491	55,909,183	
8	Gross income from interest, dividends,						<del></del>	<del></del>	
Ü	payments received on securities loans, rents, royaltles and income from similar sources	1,639,824	2,138,764	1,559,145	1,604,851	1	,657,638	8,600,222	
9	Net income from unrelated business 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 IV.)	47,677	86,555	33,629	42,018		31,612	241,491	
11	Total support. Add lines 7 through 10							64,750,896	
12	Gross receipts from related activities, etc	. (see instructio	ns)			12		22,347,372	
13	First five years. If the Form 990 is for organization, check this box and stop he	the organizatio		d, third, fourth	-			n 501(c)(3) , , $\blacktriangleright$ $\Box$	
Sec	tion C. Computation of Public Su								
14	Public support percentage for 2009 (line	6, column (f) di	vided by line 11	i, column (f))		14		76.14 %	
15	Public support percentage from 2008 Sci	hedule A, Part I	l, line 14 .			15		86.33 %	
16a	331/3 % support test—2009. If the organiand stop here. The organization qualifies				line 14 is 33% 9		-		
b	331/3 % support test—2008. If the organization quality box and stop here. The organization quality								
17a	a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.								
	10%-facts-and-circumstances test-2008 more, and if the organization meets the "facts-and-circumstances test-2008" organization meets the "facts-and-circumstances test-2008" organization meets the "facts-and-circumstances" or "facts-and-circumstanc	acts-and-circum ances" test. The	stances" test, c organization qua	heck this box a difies as a public	and <b>stop here.</b> By supported or	Expia ganiza	in in Part I atlon	lV how the	
18	Private foundation. If the organization did	I not check a bo	x on line 13, 16a	a, 16b, 17a, or 1	7b, check this	box a	nd see inst	ructions ► 📋	
					0.44			*** 000 ETI 0000	

Sche	dule A (Form 990 or 990-EZ) 2009						Page 3
Pai	t III Support Schedule for Orga				a)(2)		
800	(Complete only if you checkettion A. Public Support	ed the box or	n line 9 of Pa	irt I.)			
*****	tion A. Public Support	(a) 2005	(b) 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the	(4)	(A) Eco	(0, 000)			
3	organization's fax-exempt purpose						
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				<u> </u>		**************************************
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons ,			-			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			:			
С	Add lines 7a and 7b , , ,						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	r	1	· · · · · · · · · · · · · · · · · · ·	T		
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						-
13	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>					
14	First five years. If the Form 990 is for organization, check this box and stop	here				ear as a sectio	
	tion C. Computation of Public Su			- 40 b			0/
15 16	Public support percentage for 2009 (lir Public support percentage from 2008 tion D. Computation of Investment	Schedule A, Pa	art III, line 15			16	<u>%</u> %
	tion D. Computation of Investmen	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<del></del>	-1 ( Hor	1	T 47 T	%
17 18	Investment income percentage for 200 Investment income percentage from 20	008 Schedule /	A, Part III, line	17		17 18	%
19a	331/3 % support tests—2009. If the org						

b 331/4 % support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/4 %, and line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🗌 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Page	4
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Part IV	<b>Supplemental Information.</b> Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
General E	xplanation - Part II, line 10, Other income from audition fees, instrument rentals, (boutique sales), sheet
music ren	tal, insurance rebates
**********	
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	***************************************
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	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
*****	***************************************
*****	***************************************

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. · Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Employer identification number Name of organization **UTAH SYMPHONY & OPERA** 0145980 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 3 Volunteer hours Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955 , , , , > Enter the amount of any excise tax incurred by organization managers under section 4955. > \$______ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . . b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (e) Amount of political filing organization's contributions received and promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

_	•
Page	-

8 (election
(b) Affillated group totals
3
Yes 🗌 No
Yes No
3

Schedule C (Form 990 or 990-EZ) 2009

	(election under section 501(h)).	(6	a)	(b)	
		Yes	Ī	Amount	_
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a b	Volunteers?	<b>√</b>			
c d	Media advertisements?		<b>√</b>		
e f	Publications, or published or broadcast statements?	<u> </u>	<b>✓</b>	5,5	15
g h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .	<b>√</b>	<b>✓</b>		0
j 2a	Other activities? If "Yes," describe in Part IV	ii.	<b>V</b>	5,5′	15
b	If "Yes," enter the amount of any tax incurred under section 4912				
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)	(5), o	r section	N. S.
	30 NC)(0).			Yes N	0
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			2 3	
Par	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II "Yes."	01(c)	(5), o		*****
1 2	Dues, assessments and similar amounts from members	tical	1		
a	Current year , , , , , , , , , , , , , , , , , , ,	•	2a 2b		
C	Carryover from last year		2c		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	f the	3		
5	and political expenditure next year?		5		
Pai	rt IV Supplemental Information				
Also	nplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, , complete this part for any additional information. nedule C, Part II-B, Line 1 - ZAP reauthorization				i. 
••••	•••••••••••••••••••••••••••••••••••••••				
••••					
••••		••••	• • • • • •	***************************************	•••
		•••••			

#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer Identification number **UTAH SYMPHONY & OPERA** 51 0145980

Pai	Organizations Maintaining Dor the organization answered "Yes		ar Funds or Accounts. Complete if
	and digarinaction and rotal rotal	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the asset	s held in donor advised
	funds are the organization's property, subj		
6	Did the organization inform all grantees, do	pnors, and donor advisors in writing the	t grant funds can be
	used only for charitable purposes and not		
Pai	purpose conferring impermissible private b	enefit?	Yes No
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e.g.		ation of an historically important land area
	Protection of natural habitat	☐ Preserv	ration of a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organiz	ation hold a qualified concentration contr	ribution in the form of a consequation
~	easement on the last day of the tax year.	ation held a qualified conservation conti	ibution in the form of a conservation
			Held at the End of the Tax Year
а	Total number of conservation easements,		
b	Total acreage restricted by conservation ea		1 _a t
c	Number of conservation easements on a c		I = 1
d	Number of conservation easements include		
3	Number of conservation easements modified the tax year ▶	. , .	
4	Number of states where property subject t	o conservation easement is located >	
5	Does the organization have a written policy		
ŭ	violations, and enforcement of the conserv		Yes No
6	Staff and volunteer hours devoted to moni-		
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring  * *	g, inspecting, and enforcing conservation	on easements during the year
8	Does each conservation easement reported 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, tl		
	the organization's accounting for conserva	tion easements.	
Par		ections of Art, Historical Treasures vered "Yes" to Form 990, Part IV, line	
4	If the organization elected, as permitted un	day CEAC 116 not to ropert in its rough	aug statement and belence about works of
Ia	art, historical treasures, or other similar asse provide, in Part XIV, the text of the footnot	ets held for public exhibition, education,	or research in furtherance of public service,
b	If the organization elected, as permitted un	der SFAS 116, to report in its revenue	statement and balance sheet works of art.
	historical treasures, or other similar assets provide the following amounts relating to the	held for public exhibition, education, or nese items:	r research in furtherance of public service,
	(i) Revenues included in Form 990, Part V	III, line 1	▶ \$
	(II) Assets included in Form 990, Part X .		, <b>&gt;</b> \$
2	If the organization received or held works following amounts required to be reported	under SFAS 116 relating to these items	s:
а	Revenues included in Form 990, Part VIII, I	ine 1 , , , , , , , , , , , , , , , , , ,	> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Par	rt III — Organizations Maintain	ing Collections	of Art, His	torical	Treasures,	or O	ther Similar .	Assets (continued)
3	Using the organization's acquisition collection items (check all that appl		ther record	ds, chec	ck any of the t	follow	ring that are a	significant use of its
а	Public exhibition		d		an or exchan			
b	Scholarly research		е		ther			
C	Preservation for future general							
4	Provide a description of the organize Part XIV.	zation's collections	and expla	ain how	they further t	he or	ganization's e	xempt purpose in
5	During the year, did the organization assets to be sold to raise funds rathe	r than to be mainta	ined as par	rt of the	organization's	colle	ction?	
Par	rt IV Escrow and Custodial A IV, line 9, or reported an					swer	ed "Yes" to F	Form 990, Part
	Is the organization an agent, truster included on Form 990, Part X? .					ns or	other assets i	not Yes No
b	If "Yes," explain the arrangement in	Part XIV and com	nplete the t	following	g table:			Amount
						1c	-	Amount
C	3					<del></del>	-	
d	Additions during the year					1d		<del></del>
θ	Distributions during the year					1e	<del>                                     </del>	
f	Ending balance						_l	
	If "Yes," explain the arrangement in	Part XIV.		<u> </u>	· · · · · · · · · · · · · · · · · · ·			
i di	rt V Endowment Funds. Co				(c) Two years b		(d) Three years ba	
		(a) Current year 26,820,984	(b) Prior	22,136	(c) Two years to	ack	(u) Tillee years ba	ick (e) Foul years back
_	Beginning of year balance	310,442		33,952		+		
b	Contributions	310,442	**	33,332				
С	Net investment earnings, gains, and losses	1,599,122	-6 60	88,365				
		1,555,122	-0,03	0,303				
	Grants or scholarships							
е	Other expenditures for facilities and programs	1,567,296		0				
	Administrative expenses	255,821	33	36,739				
g	End of year balance	26,907,431		20,984				
2	Provide the estimated percentage of					200001000000		30 years 10
а	Board designated or quasi-endown	-						
b	Permanent endowment ▶							
C	Term endowment ► 0. %	6						
За	Are there endowment funds not in th	e possession of th	e organiza	tion that	are held and	admi	nistered for th	е
	organization by:	•	-					Yes No
	(i) unrelated organizations							3a(i) √
	(ii) related organizations If "Yes" to 3a(ii), are the related org							. 3a(ii) ✓
								. <u>3b</u>
4	Describe in Part XIV the intended u					- V I	: 40	
Par	rt VI Investments—Land, Bu	<u></u>			·	<del></del>		<del></del>
lo-miorani di di	Description of Investment	(a) Cost or ot (Investm			t or other (other)		ccumulated preclation	(d) Book value
1a	Land		0		229,500			229,500
b	Buildings		0		5,509,709		1,764,719	3,744,990
С	Leasehold improvements		0	·····	190,693		83,880	106,813
d	Equipment		0		1,035,420		958,798	76,622
Θ.	Other		0		1,418,160		815,849	602,311
ıota	al. Add lines 1a through 1e. <i>(Column (d)</i>	must equal Form 9	90, Part X, d	column (	ട), iine 10(c).)		🕨 ]	4,760,236

Part VII Investments—Other Securities	Soo Form 900 Part Y	lina 12	rage <b>o</b>
(a) Description of security or category	(b) Book value	(c) Method of valu	etion [,]
(including name of security)	(b) book value	Cost or end-of-year ma	
Financial derivatives ,			
Closely-held equity interests			
Other Real Estate - timeshare	6,900	Cost	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	6,900		
Part VIII Investments—Program Related		line 13	
(a) Description of investment type	(b) Book value	(c) Method of valu	ation:
(a) Description of investment type	(b) Book Value	Cost or end-of-year ma	arket value
Musician Instrument Loans	68,590	End-of-Year Market Value	
·			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			<u> </u>
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	68,590		
Part IX Other Assets. See Form 990, Par	T X, IING 15. (a) Description		(b) Book value
<u></u>	(a) Description		(b) Book value
			· · · · · · · · · · · · · · · · · · ·
	<u>,</u>		
Total. (Column (b) must equal Form 990, Part X, col. (	'B) line 15.)		
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount		
Federal income taxes		<u>0</u>	
Wells Fargo Line of Credit	664,68		
	1		

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited	Financial Stater	nents
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	17,045,862
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	17,071,646
3	Excess or (deficit) for the year. Subtract line 2 from line 1 , , , , , ,	3	-25,784
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses , , , , , , , , , , , , , , , , , ,	6	0
7	Prior period adjustments	7	<u>0</u>
8	Other (Describe in Part XIV.) ,	8	0
9	Total adjustments (net). Add lines 4 through 8	nd 9 10	0 25 794
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and XII Reconciliation of Revenue per Audited Financial Statements W		-25,784 or Return
			177 000 000
1 2	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12:		,,
_	Net unrealized gains on investments	ol	
a b	Donated services and use of facilities	1,074,240	
C	Recoveries of prior year grants	0	
d	Other (Describe in Part XIV.)	-256,306	
e	Add lines 2a through 2d	409600	e 817,934
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	o	
b	Other (Describe in Part XIV.) , , , , , , , , , , ,	-130,042	
C	Add lines 4a and 4b	4	c -130,042
5			1111111
Pai	rt XIII Reconciliation of Expenses per Audited Financial Statements V	Vith Expenses	
1	Total expenses and losses per audited financial statements , , , , , ,		18,342,477
2	Amounts Included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	1,074,240	
b	Prior year adjustments	0	
C	Other losses	0 540	
þ	Other (Describe in Part XIV.)	66,549	4 440 700
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		17,201,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	o	
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	-130,042	
b	Add the self-th	4	c -130,042
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
44 Table 14 Tab	I XIV Supplemental Information		11101111
	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I	III. lines 1a and 4:	Part IV. lines 1b
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XI		
	part to provide any additional information.		
	nedule D, Part V, Line 4 - USUO uses 5% of 12 month quarterly average to help c	ontribute to the p	program
exp	penses of the organization.		
·;	LL B B VV II		•••••
SCI	hedule D, Part X - None		
Scl	nedule D, Part XII, Line 2d - Interest and dividends on Endowment \$510,293; Real	lized & unrealize	d gains/losses
	34,502; Contribution to Endowment \$310,442; Contributions for future use \$1,316		
	ntributions (\$1,936,112); 5% Draw (\$1,441,880)		*********************

Part XIV - Supplemental Information (Continued)
Schedule D, Part XII, Line 4b - Costume/set rental expenses recognized as an offset to rental revenues on tax return
Schedule D, Part XIII, Line 2d - Endowment Investment Expenses \$225.966; Allowance for Bad Debts on Endowment (\$159,417)
Schedule D, Part XIII, Line 4b - Costume/set rental expenses recognized as an offset to rental revenues on tax return.
······································
•••••••••••••••••••••••••••••••••••••••
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#### **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization **Compensation Information** 

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.
► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

0145980 **UTAH SYMPHONY & OPERA** Questions Regarding Compensation Part I No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ Housing allowance or residence for personal use ☐ First-class or charter travel Payments for business use of personal residence ☐ Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments ☐ Discretionary spending account Personal services (e.g., 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Written employment contract ☐ Compensation committee ☐ Independent compensation consultant ☑ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a a Receive a severance payment or change-of-control payment?, . , . , . , . . . . . 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . . . 4c c Participate in, or receive payment from, an equity-based compensation arrangement?..... If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Page 2

Schedule J (Form 990) 2009

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

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

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

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	Continue of the continue of th			Į.
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(a)-(a)(a)	ry Compensation reported in prior Form 990 or Form 990-EZ
Ralph Thomas Matson	8	140,674		0	0	27,102	167,776	151,476
	E	0	0	0	0	0	0	0
Melia Tourangeau	8	178,816		0		21,190	200,006	188,231
	: 📵	0	0	0	0	0		0
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	8							
	8							
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Schedule J (Form 990) 2009

Schedule J (Form 990), 2009	Page 3
Part III Supplemental Information	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.	te this part
Schedule J, Part I, Line 1a - Alta Club Rotary	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Schedule 3 (Chapter 1) Chapter 1	Schedule J (Form 990) 2009

#### **SCHEDULE J-2** (Form 990)

#### **Continuation Sheet for Form 990**

Open to Public

OMB No. 1545-0047

Department of the Treasury

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See the Instructions for Form 990.

Inspection Employer identification number Name of the Organization **UTAH SYMPHONY & OPERA** 0145980

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I **Employees** (C) (D) (E) (F) (A) (B) Position (check all that apply) Reportable Reportable Estimated Name and title Average hours per week compensation compensation amount of Individual to or director Highest compensated employee Institutional trustee Key employee from from related other the organizations compensation organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization trustee and related organizations Douglas Short Trustee 1 0 0 0 Jeffery Smith 0 2 0 0 Trustee Shirley Van Wagenen 12.0 0 0 0 Trustee Judith Vander Heide Trustee 5 0 0 0 Jim Wall Trustee 3 0 0 0 Bob Wheaton 4 0 0 0 Trustee John Williams 0 0 Trustee 1 0 Jolene Zito Trustee 1 0 0 0 Joanne Shiebler Trustee 5 0 0 0 Raymond Dardano 0 Vice-Chair 3 0 0 Patricia Richards Chair of the Board 10 0 0 0 Melia Tourangeau 40 178,816 0 0 CEO David Green 0 COO 40 89,978 0 Steve Hogan VP Finance/CFO 40 76,645 0 0 Ralph Thomas Matson **Concert Master** 40 140,674 0 0

#### **SCHEDULE L** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered

Open To Public Inspection

OMB No. 1545-0047

Name of the organization

"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. ► See separate instructions. Employer identification number

UTAH SYMPHONY & OPERA						5	1 :		014	45980	)	
Part I Excess Benefit Transaction Complete if the organization are								Part V,	, line 4	10b.		
1 (a) Name of disqualified person			(b) Description of transaction						(c) Corrected?			
tal rearie of disqualines person			(n) rescribition or transaction						Yes	No		
<del> </del>							<u>.</u>			•		
									<del></del>			
2 Enter the amount of tax imposed of under section 4958								-	▶ \$			
3 Enter the amount of tax, if any, on	line 2, abo	ve, rein	nbursed by	the orga	anization				▶ \$			
Part II Loans to and/or From Inte			on Form 99	90, Part I	V, line 26,	or Form 9	990-E	Z, Pai	rt V, I	ine 38	3a.	
(a) Name of interested person and purpose		to or from anization?			(d) Balance due		(e) in default?		. ,		(g) Written agreement?	
	То	From					Yes	No	Yes	No	Yes	No
							_					
Part III Grants or Assistance Bendary Complete if the organization	efiting Inte	rested	Persons.	. ▶ \$ 00 Part l			<u> </u>					
(a) Name of Interested person	1		between inte	erested pers		(0	) Amou	int and	type o	f assist	tance	
											*** ****	
		i		<del></del>								
Part IV Business Transactions Inv Complete if the organization	-			90, Part I	V, line 28a,	. 28b, or	28c.		·			
(a) Name of Interested person (b) Relationship interested person organization		p between (c) Amount of transaction		(d) Description of transaction			on	(e) Sharing of organization's revenues?				
Bob Wheaton GM Deer Valley Resort	Boore	d Memb	or		161,549	venue r	ontal	nmfc	to ro	cort	Yes	No
DOD WHEATOH OW Deer Valley Resolt	nsoar	A INIGIND	) E I		101,549	venuer	ental	pints	10 16	INUE	<u> </u>	<u> </u>
								.,				
			<del> </del>	I								

#### SCHEDULE M (Form 990)

#### **Noncash Contributions**

ns answered "Yes" on Form
des 29 or 30.
Op

OMB No. 1545-0047

2009

Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

**UTAH SYMPHONY & OPERA** 0145980 Part I Types of Property (a) (b) (c) (d) Method of determining Check If Number of contributions Revenues reported on applicable Form 990, Part VIII, line 1g revenues Art—Works of art 2 Art—Historical treasures . 3 Art - Fractional interests 4 Books and publications , , Clothing and household goods . . . . . . . Cars and other vehicles . . 6 7 Boats and planes . . . . 8 Intellectual property . . . . 21 313,874 ave between high & low Securities-Publicly traded . 9 10 Securities-Closely held stock . 11 Securities-Partnership, LLC, or trust interests . . . . . Securities-Miscellaneous 12 13 Qualified conservation contribution - Historic structures . . . . . . . Qualified conservation contribution-Other , . . . Real estate - Residential . . 15 16 Real estate - Commercial . Real estate-Other . . . . 17 18 Collectibles 19 Food inventory , , , . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . . 22 Historical artifacts . . . . 23 Scientific specimens 24 Archeological artifacts , , , Other ▶ (.....) 25 Other ▶ (.....) 26 27 Other ▶ (.....) 28 Other ► (.....) Number of Forms 8283 received by the organization during the tax year for contributions for 0 which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II. If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

hedule M (Form 990) 2009 Page <b>2</b>							
Part II	<b>Supplemental Information.</b> Complete this part to provide the information required by Part I, lines 3 32b, and 33. Also complete this part for any additional information.						
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		2002000					
	***************************************						

#### SCHEDULE O (Form 990)

## Supplemental Information to Form 990

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury

Attach to Form 990. Employer identification number Name of the organization

**UTAH SYMPHONY & OPERA** 0145980 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 - We have several guilds-The Symphony Guild, Ogden Opera Guild--and the Ogden Symphony Ballet Association. All are entitled to ex officio board position by election. The orchestra union also elects two members to serve on the board. Form 990, Part VI, Section B, Line 11 - Prepared by CFO, reviewed by Finance, Audit and Executive committees, posted to website for entire board review.

Form 990, Part VI, Section B, Line 12c - The values governing the affairs of 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 that 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 Utah Symphony & Opera before governmental leaders, charitable foundations, patrons and donors; or when dealing with vendors, partners, lessees, and other third 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, in such a manner that a conflict arises between the interest of the organization and the staff member's 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 President/CEO.

Supplemental	Information	(Contir	ıued)

Form 990, Part VI, Section B, Line 15 - League of American Orchestras Survey for salaries, 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 collected annually.						

Schedule O, Statement 1

Form: 990

Page: 2

Line Number: Part III Line 4d

# Other Program Services Accomplishments

UTAH SYMPHONY & OPERA 51-0145980

Activity Code	Description	Expense	Grants	Revenue
	Please see www.usuoeducation.org for more information. (177474 viewers)	1,551,950	0	21,351
Total:		1,551,950	0	21,351