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-orm 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)

2010

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the	2010 ca	lendar year, or tax year beginn	ing 09-01-2010 and ending 08-31-20	11	_				
B Che	eck ıf a	pplicable	C Name of organization MINNESOTA ORCHESTRAL ASSOCIA	ATION		D Employe	r identification number			
☐ Add	lress ch	hange	Doing Business As			41-069	3875			
☐ Nai	ne cha	inge	Doing Business As			E Telephor	ne number			
Init	ıal retu	ırn		mail is not delivered to street address)	Room/suite	- (612)371-5600				
☐ Ter	mınate	ed	1111 NICOLLET MALL			, , , , , , , ,				
┌ Am	ended	return	City or town, state or country, and	ZIP + 4		G Gross reco	eipts \$ 80,102,783			
┌ App	lication	n pending	MINNEAPOLIS, MN 55403							
			F Name and address of pri	ncipal officer	H(a) Is this a	group return for a	ffiliates? Yes No			
			MICHAEL HENSON		15 (11)	group recurring	minaces y Tes y Tes			
			1111 NICOLLET MALL MINNEAPOLIS,MN 5540	3	H(b) Are all					
							ist (see instructions)			
I Ta	x-exen	npt status	▼ 501(c)(3)	(insert no) 4947(a)(1) or 527	H(c) Group	exemption	number F			
J W	ebsite	e: ► WW	W MNORCH ORG							
K Forr	n of or	wanization	Corporation Trust Association	on Other In	L Year of for	mation 1907	M State of legal domicile			
KTOII	11 01 01	gariization	p corporation p must p Association	on Culei F	L real of for	nation 1907	MN			
Pa	rt I	Sum	mary							
				on or most significant activities						
ą.	:	TO ENR	CH AND INSPIRE OUR COM	MUNITY AS A SYMPHONY ORCHEST	RA AND ORCH	ESTRA HAL	L			
ĕ E	·									
Ě	:									
Activities & Governance	2	Check th	is box দ if the organization d	iscontinued its operations or disposed	d of more than 2!	5% of its ne	t assets			
জু -	3	Number	of voting members of the gover	ning body (Part VI, line 1a)		3	85			
20 જ	4	Number	of independent voting members	of the governing body (Part VI, line 1	b)	4	81			
₽	5	Total nu	mber of individuals employed in	calendar year 2010 (Part V, line 2a)		5	617			
흤	6	Total nu	mber of volunteers (estimate if	necessary)		6	600			
ă	7a ⁻	Total un	related business revenue from F	Part VIII, column (C), line 12		78	143,238			
	ь	Net unre	lated business taxable income	from Form 990-T, line 34		71	-17,708			
					Prior	Year	Current Year			
	8	Contri	butions and grants (Part VIII, I	ıne 1 h)		31,141,394	18,628,242			
를	9	Progra	m service revenue (Part VIII, I	ine 2g)		9,206,202	8,655,788			
Revenue	10	Invest	ment income (Part VIII, colum	n (A), lines 3, 4, and 7d)		4,566,425	8,935,985			
ä	11	Other	revenue (Part VIII, column (A)	, lines 5, 6d, 8c, 9c, 10c, and 11e)		117,093	175,010			
	12			l (must equal Part VIII, column (A), l						
				<u> </u>		45,031,114				
	13			t IX, column (A), lines 1-3)		60,300	 			
	14		·	IX, column (A), line 4)		C	0			
88	15	5-10)		ee benefits (Part IX, column (A), lines	5	22,423,888	23,238,171			
Ě	16a	•		, column (A), line 11e)		154,415				
Expenses	ь		ndraising expenses (Part IX, column (I							
Ω	17			lines 11a-11d, 11f-24f)		8,958,702	7,797,247			
	18			ust equal Part IX, column (A), line 25)		31,597,305				
	19		·	18 from line 12		13,433,809				
₹ 00°			ad rest expenses dustract mis			of Current				
Net Assets or Fund Balances						ear	End of Year			
988 888	20	Total	assets (Part X, line 16)		1	83,186,703	192,514,624			
절절	21	Total I	iabilities (Part X, line 26)			27,151,768	24,321,400			
<u> 22</u>	22	Netas	sets or fund balances Subtract	t line 21 from line 20	. 1	56,034,935	168,193,224			
Pai	t II	Sign	ature Block							
	edge:	and belie	f, it is true, correct, and complete	ned this return, including accompanying . Declaration of preparer (other than offi	cer) is based on a	ll information				
c:		**** Signa	** ture of officer		20: Da	12-07-11 te				
Sign Here		'		ETNANCE	54					
	-		N EBENSTEINER VICE PRESIDENT OF or print name and title	FINANCE						
	I	Print/Type		Preparer's signature	Date	Check if self-	_ PTIN			
ייים		preparer's	name XIAOYAN LUO	XIAOYAN LUO		employed F	- LIII			
Paid	<u>_</u> [Fırm's nar	ne FCLIFTONLARSONALLEN LLP				Firm's EIN			
Prepa Use (Fırm's add	ress 🕨 220 South Sixth Street Su	TTE 300			Phone no ▶ (612) 376-			
	JIII Y		MINNEAPOLIS, MN 55402				4500			
May	he IR	S discus	·	shown above? (see instructions) .			✓ Yes 「No			

Par		ent of Program Service Aschedule O contains a response	Accomplishments to any question in this Part III		৮
1		the organization's mission	, ,		
			TES AND SERVES OUR COMMUN ERED WITHIN A SUSTAINABLE		NALLY RECOGNIZED
FLKI	ORMANCES OF E	LACEF FIGNAL MUSIC DELIV	LRED WITHIN A 303TAINABLE	FINANCIAL STRUCTURE	
2			rogram services during the year w	hich were not listed on	. E.N
	•	30 or 990-EZ? e these new services on Schedi			res No
3	•		significant changes in how it cond	lucts, any program	
				Г	Yes 🔽 No
4	Describe the exe		each of the organization's three la		
			and section 4947(a)(1) trusts are evenue, if any, for each program se		of grants and
4a	(Code) (Expenses \$	26,701,236 including grants of \$	68,321) (Revenue \$	8,655,788)
	EACH FRIDAY EVEN PROGRAMS THE MI HIS INTENSE AND I REPERTOIRES DUF CARNEGIE HALL AN HAS EXTENDED HIS VANSKA'S ARTISTIC TO RECORD ALL TH RECENTLY COMPLE AMASSED RAVE REPRAISING IT AS TH NOMINATION FOR MAND CONCERT AND CONCERT AND CONCERTS AND REINCLUDING YOUNG EXPERIENCED A MI SUCH ORCHESTRA'E STABLISHES MULT NUMEROUS POPS COUNTRY AND WOTHE NATION, AND ITHE ORCHESTRA'S AND PRESENTATION BETWEEN THE ORCPERFORMANCES AF	IING BY MINNESOTA PUBLIC RADIO MINNESOTA ORCHESTRA WELCOMED FIDYNAMIC PERFORMANCES, VANSKA IS RING HIS TENURE, HE HAS DRAWN EXID LINCOLN CENTER, FOUR EUROPEANS TENURE WITH THE MINNESOTA ORCE DIRECTION, THE ORCHESTRA HAS IS HE BEETHOVEN PIANO CONCERTOS, WITED A FIVE-YEAR, FIVE DISC INITIATI VIEWS, WITH THE NEW YORK TIMES WE "MODERN BEETHOVEN RECORDING" BEST ORCHESTRAL PERFORMANCE", AWARD VANSKA AND THE ORCHESTRA ITASIA, RECORDED OVER TWO SEASON CONCENTS (YPS) AND TARKINNESOTA ORCHEST (YPS) AND TARKINNESOTA ORCHEST (YPS) AND TARKINNESOTA ORCHEST (YPS) AND TARKINNESOTA ORCHEST (YPS) AND TARKINNESOTA ORCHESTRA YOUNG PEOPLE-SPONSORED INITIATIVES AS SIDE-BY-TI-YEAR RELATIONSHIPS WITH COMMUNICATE ORCHESTR NAMED IRVIN MAYFIELD AS THE SERIE BELOVED URBAN SUMMER MUSIC FES NS SARAH HICKS IN 2011, THE ORCHEST HESTRA AND COMMUNITIES AROUND ND ACTIVITIES THAT REFLECT THE INTO ACTIVITIES THAT	E AT ORCHESTRA HALL IN MINNEAPOLIS, ANY PROGRAMS ARE SUBSEQUENTLY HEA NISH CONDUCTOR OSMO VANSKA AS ITS RECOGNIZED FOR COMPELLING INTERPESTRAORDINARY REVIEWS FOR CONCERTS TOURS-THE MOST RECENT IN AUGUST OF THE STRATHOUGH 2015 MICHAEL HENSS OF THE STRATHROUGH 2015 MICHAEL HENSS OF THE PLANTS TOUTS OUTS OF THE PLANTS TYPE SENDEN SUDBIN, AND THE VETO RECORD THE COMPLETE BEETHOW WRITING THAT IT "MAY BE THE DEFINITIVE PAR EXCELLENCE" THE ORCHESTRA'S REAND THE CD FEATURING THE SECOND AT A HAVE ALSO RELEASED LIVE IN-CONCERNS WITH BRITISH PIANIST STEPHEN HOUSE TRA CONNECTS WITH MORE THAN 85,00 GET FREE FAMILY CONCERTS IN THE LASSE'S CONCERT - A SERIES THE ORCHESTRA SINGUESTE STRATE SHE ORCHESTRA HALL SES ARTISTIC DIRECTOR AMERICAN CONICSTIVAL, SOMMERFEST, WHICH WAS LAUNCHED "COMMON CHORDS," A THE STATE EACH PARTNERSHIP IS DESITERESTS, DIVERSITY AND ASPIRATIONS ODVIDED TO PATRONS AND PARTICIPANTS	ARD NATION-WIDE ON AMERICAN PUBS TENTH MUSIC DIRECTOR IN THE FARETATIONS OF THE STANDARD, CONTON SON SERVES AS PRESIDENT AND CEO COSTANDING ACCOLADES CURRENTLY LOOMPLETE SIBELIUS SYMPHONIES VARENDED OF THE BIS LABEL TO BE CORDING OF BEETHOVEN'S NINTH RISECORDING OF BEETHOVEN'S NINTH RISECORDING OF BEETHOVEN'S NINTH RISECORDING OF BEETHOVEN'S NINTH RISECORDING OF THAIKOVSKY'S TISEL FOR THE HYPERION LABEL IN ADD OF MUSIC LOVERS ANNUALLY THROUGH TO DECADE MORE THAN HALF A MILLICAL AND OFFERED FOR 100 YEARS MUSIC AND AROUND THE STATE THE ENSEMEN GENERS RANGING FROM ROCK, JAZENDE SERIES FEATURING TOP PER DUCTOR ANDREW LITTON SERVES AS CHED IN 1980 ITS POPS SERIES IS LENEW INITIATIVE TO CREATE ONE-OFFERED FOR TO CREATE ONE-OFFERED TO CREATE ONE	LIC MEDIA RADIO LL OF 2003 PRAISED FOR EMPORARY AND NORDIC DING APPEARANCES AT 5, 2007 AND 2008 VANSKA IF THE ORCHESTRA UNDER INDERWAY ARE INITIATIVES NSKA AND THE ORCHESTRA HE COLLECTION HAS INANCIAL TIMES OF LONDOI ECEIVED A 2008 GRAMMY NATED FOR A 2009 CLASSIC HAEE PIANO CONCERTOS ITION TO TRADITIONAL H EDUCATIONAL PROGRAMS IN STUDENTS HAVE ICIANS ALSO ENGAGE IN JPBEAT PROGRAM, WHICH BLE ASLO OFFERS Z AND BIG BAND TO LATIN, RFORMERS FROM AROUND ARTISTIC DIRECTOR FOR D BY DIRECTOR OF POPS A-KIND COLLABORATIONS ESTIVAL WEEK OF EBUTED IN GRAND RAPIDS,
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	_				
4d		services (Describe in Schedule		\/Payanus #	,
	(Expenses \$		g grants of \$ 6,701,236) (Revenue \$	J
	i ocai piogiaiii s	CITIC CAPCIISCSF 9	0,, 01,200		

art TV	Checklist of	Required	Schedules
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? $^{f z}$	2	Yes	
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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part V^{\bullet}	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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		N o
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		No
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
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		No
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		No
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	Yes	
		F:	orm 990	(2010)

	<u> </u>
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	-1	
			Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 128			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
2a	gaming (gambling) winnings to prize winners?	1c	Yes	
	return		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	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		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ia	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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
a	Organizations that may receive deductible contributions under section 170(c). 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	Yes	
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			No
d	file Form 8282?	/c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	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		
)	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
О	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	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 amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand 13c		i	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response to any question in this Part VI					. 🔽	

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
_	year			
Ь	Enter the number of voting members included in line 1a, above, who 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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
	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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
				1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶MN			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

- (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

 Own website. Another's website. Upon request
 - Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of
- interest policy, and financial statements available to the public. See Additional Data Table

(612) 371-5600

State the name, physical address, and telephone number of the person who possesses the books and records of the organization BRYAN EBENSTEINER
1111 NICOLLET MALL
MINNEAPOLIS, MN 55403

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organ	nization nor any r	<u>elated o</u>	rgan	zatio	on c	ompen	sate	d any current office	er, director, or trustee				
(A) Name and Title	(C) Position (check all that apply)				verage Position (check all hours that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
See Additional Data Table													

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

	(A) Name and Title	(B) A verage hours		tion (that a			II		(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima amount o compens	ited f other
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from t rganizati relati organiza	:he on and ed
See Additional Data Table													
							-						
						\vdash	+				-		
							-						
1b	Sub-Total	.			٠.	٠.	'	 					
	Total from continuation sheets						 -						
d	Total (add lines 1b and 1c) .							F	2,636,741		0	1	186,309
2	Total number of individuals (incl \$100,000 in reportable compen	udıng but not lın	nited to	thos	e lıs	ted	above) who	received more tha	n	•		
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					ey e	mploy •	ee, o	r highest compens	ated employee	3		No
4													
5	Did any person listed on line 1a services rendered to the organiz									r individual for •	5		No
_													
1	ection B. Independent Con Complete this table for your five		ncatod :	ndon	anda	ant c	contra	toro	that received more	than			
1	\$100,000 of compensation from			nuep	enue	=11L C	.ontid	LUIS	mac received more	: LIIGII			
	<u> </u>	/A\								(D)		/6	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
KUWABARA PAYNE MCKENNA & BLUMBERG 322 KING STREET WEST 3RD FLOOR TORONTO M5V1J2 CA	ARCHITECT	974,817
RUFFALO CODY 65 KIRKWOOD NOTH ROAD SW CEDAR RAPIDS, IA 52404	TELEPHONE CAMPAIGN	333,822
NELSON TIETZ & HOY INC 81 SOUTH 9TH STREET SUITE 330 MINNEAPOLIS, MN 55402	PROJECT MANAGER	216,963
MINNESOTA CHORALE 528 HENNEPIN AVE SUITE 407 MINNEAPOLIS, MN 55403	GUEST ARTIST	118,000
SOUNDS SPACE DESIGN ST GEORGES COURT 131 PUTNEY BRIDGE LONDON, GREATER LONDON SW15 2PA UK	ACOUSTICIAN	112,870
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	

\$100,000 in compensation from the organization ▶7

Part \		2010)					Pa	ge 9
	VIII	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	T							512, 513, or 514
Contributions, gifts, grants and other similar amounts	ь	Federated campaigns Membership dues						
, gॉॉरड, बोबा ब		Fundraising events Related organizations		812,898				
utions her sin	f	All other contributions, gifts, grants similar amounts not included abov	s, and 1f	1,202,381				
Contrib and off	g	Noncash contributions included in I	nes 1a-1f \$	1,813,883	18,628,242			
	2a			Business Code	· · ·			
Program Service Revenue		ORCHESTRA TICKETS		711130	5,208,662	5,208,662		
<u>윤</u>	Ь	NON-ORCHESTRA TICKETS		711130	1,332,910	1,332,910		
Š	С	CONCESSIONS & FEES		711130	1.016.779	1,013,084	3,695	
Æ	d	ORCHESTRA SERVICE FEES		532000	692,850			
13 13 13	e	RENTAL EVENTS		711130	383,004	243,606	139,398	
ر آو	f	All other program service re	venue		21,583	21,583		
4	g	Total. Add lines 2a-2f .			8,655,788			
	3	Investment income (includir	ng dividends, interest					
		and other similar amounts)						
	4	Income from investment of tax-ex	empt bond proceeds		1,120,580		145	1,120,43
	5	Royalties			10,872			10,87
			(ı) Real	(II) Personal				
		Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)						
			(ı) Securities	(II) O ther				
		Gross amount from sales of assets other	51,051,050					
	ь	than inventory Less cost or other basis and sales expenses	43,235,645					
	С	Gain or (loss)	7,815,405					
	d	Net gain or (loss)			7,815,405			7,815,40
Other Revenue		Gross income from fundraisi (not including \$812,898 of contributions reported on See Part IV, line 18	line 1c)					
<u>-</u>		osor arety, ille 10 1 1	a	244,241				
Ę	ь	Less direct expenses .	b	267,291				
_		Net income or (loss) from fu			-23,050			-23,050
	9a	Gross income from gaming a	ctivities See Part IV, line 19 . a					
				ь				
		Net income or (loss) from ga						
		Gross sales of inventory, les returns and allowances	SS					
		I I I I I I I I I I I I I I I I I I I	a	392,010				
	ь	Less cost of goods sold .	. b	204,822				
			les of inventory 🕨		187,188			187,188
		Net income or (loss) from sa						
		Net income or (loss) from sa Miscellaneous Revenue		Business Code				
		Miscellaneous Revenue		Business Code				
	С	Miscellaneous Revenue		Business Code				
	11a	Miscellaneous Revenue		Business Code				
	11a b	Miscellaneous Revenue	·	Business Code				
	11a b c	Miscellaneous Revenue		Business Code				
	11a b c d	Miscellaneous Revenue		Business Code				

	990 (2010)				Page 10
Par	t IX Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21 $$	68,321	68,321		<u> </u>
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and	1 074 244	1 211 512	662 721	
6	key employees	1,874,244	1,211,513	662,731	
7	Other salaries and wages	16,656,882	15,086,524	785,175	785,183
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	767,397	696,731		35,333
9	Other employee benefits	2,844,186	2,530,114	157,035	157,037
10	Payroll taxes	1,095,462	975,330	 	60,066
а	Fees for services (non-employees) Management				
b	Legal	49,588	35,711	13,877	
c	Accounting	36,547		36,547	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17	193,081			193,081
f	Investment management fees				
g	Other	2,512,046	2,479,228	22,812	10,006
12	Advertising and promotion	1,547,175	1,547,175		
13	Office expenses	276,707	130,850	82,584	63,273
14	Information technology	143,603	44,584	70,208	28,811
15	Royalties	83,630	83,630		
16	Occupancy	545,422	410,132	127,500	7,790
17	Travel	150,397	115,350	20,716	14,331
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	138,204	119,852	15,092	3,260
20	Interest	666,413	61,101	605,312	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	610,511	550,511	30,000	30,000
23	Insurance	218,057	49,263	168,794	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	ADMIN & FACILITY COSTS	267,219	172,061	53,479	41,679
b	CREDIT CARD FEES	220,601	194,341		26,260
c	DONOR RECOGNITION	192,213			192,213
d	MUSIC RENTAL LICENSES	85,297	85,297		
е	DIRECT CONCERT EXPENSES	53,617	53,617		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	31,296,820	26,701,236	2,947,261	1,648,323
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				000 (2010)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			454,429	1	767,456
	2	Savings and temporary cash investments			1,289,876	2	1,298,074
	3	Pledges and grants receivable, net			22,806,236	3	16,484,307
	4	Accounts receivable, net			545,554	4	342,810
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L			37,500	5	0
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$, and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	mploy	ers, and			
÷		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use			59,545	8	96,352
	9	Prepaid expenses and deferred charges			1,104,320	9	1,093,994
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	26,859,483				
	b	Less accumulated depreciation	10b	17,821,244	8,144,299	10c	9,038,239
	11	Investments—publicly traded securities			64,892,288	11	74,523,163
	12	Investments—other securities See Part IV, line 11		82,528,256	12	87,942,512	
	13	Investments—program-related See Part IV, line 11		1,204,818	13	927,717	
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		119,582	15	0	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	183, 186, 703	16	192,514,624		
	17	Accounts payable and accrued expenses .	3,128,439	17	2,316,526		
	18	Grants payable				18	
	19	Deferred revenue			3,434,029	19	3,555,696
	20	Tax-exempt bond liabilities			1,690,000	20	1,690,000
68	21	Escrow or custodial account liability Complete Part IV of Schedu				21	_
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ei.		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties			9,250,000	24	9,250,000
	25	Other liabilities Complete Part X of Schedule D			9,649,300	25	7,509,178
	26	Total liabilities. Add lines 17 through 25			27,151,768	26	24,321,400
~		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olete l	ines 27			
ě		through 29, and lines 33 and 34.					
an	27	Unrestricted net assets			-13,302,321	27	-10,310,465
Balance	28	Temporarily restricted net assets			35,573,179	28	35,747,124
둳	29	Permanently restricted net assets			133,764,077	29	142,756,565
Fund		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	nd con	nplete			
ö		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32	
Net	33	Total net assets or fund balances			156,034,935	33	168,193,224
	34	Total liabilities and net assets/fund balances			183, 186, 703	34	192,514,624

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		36,3	395,02
2	Total expenses (must equal Part IX, column (A), line 25)	2			296,82
3	Revenue less expenses Subtract line 2 from line 1	3		5,0	98,20
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		156,0	34,93!
5	Other changes in net assets or fund balances (explain in Schedule O)	5		7,0	060,08
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		168,1	193,224
Par	Time Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990 Cash Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			i.	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	Į	2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued			
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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

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As Filed Data -

DLN: 93493195001122

Employer identification number

OMB No 1545-0047

OMB No 1545-004

2010

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

MINNESOTA ORCHESTRAL ASSOCIATION

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

41-0693875

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

3	ı	A nosp	ital or a coo	perative nospital sei	rvice organiz	ation descri	ped in sectio i	n 1/U(b)(1)(A)(III).				
4	Γ			n organization operat ty, and state	ed in conjun	ction with a	hospital desc	ribed in sec t	tion 170(b)(1	L)(A)(i	iii). Ent	er the	
5	Γ	_	-	erated for the benefit	_	or universit	y owned or op	perated by a	governmenta	al unit	describ	ed in	
•	_			A)(iv). (Complete P				170(b)(1)	(A)()				
6 7	ا ا			local government or	-					+		مالطنيما.	
,	Ι*	describ	ed in	at normally receives (A)(vi) (Complete Page 1)		i part of its s	support from	a governmer	ital unit or ire	om the	genera	ii public	
8	Г			described in section	•	A)(vi) (Com	nlete Part II)					
9	, T								utions memb	hershir	n fees a	and are	55
_	'	_	n organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross eccipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
			s support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses										
			_	ganization after June				-		u x) 11 0	iii busii	103303	
LO	\vdash			ganized and operated									
1	<u>'</u>	_		ganized and operated ganized and operated	· ·		· ·			carry	out the	nurnos	es of
	,	_	•	ly supported organiza	•				•				
			•	bes the type of supp								(-/(-/-	
		aΓ	Type I	b Type I	I c	Type III	- Functionall	y integrated	d		Type I	II - Oth	ner
e	Γ	,	_	ox, I certify that the	_		,	,	,				
				on managers and oth	ner than one	or more pub	icly supporte	ed organizati	ons describe	d in se	ection 5	09(a)(:	1) or
f			509(a)(2)	received a written de	etermination	from the IRS	Sthatitis a T	Tyne I Tyne	II or Type I	II suni	nortina	organiz	ation
•			his box	received a written at	. cermination	nom the rive	, (1146 16 15 4 1	, , , , , , , , , , , , , , , , , , , ,	11 01 1 9 pc 1.	ii sup	porting	organiz	- T
g		Since A	ugust 17, 2	2006, has the organi	zatıon accep	ted any gift	or contributio	on from any o	of the				•
			g persons?										
				rectly or indirectly c	•			persons desc	cribed in (ii)			Yes	No
				governing body of th		_	tion?				11g(i)		
				er of a person descril			_				11g(ii)	_	
				led entity of a persoi							11g(iii)	
h		Provide	the following	ng information about	the supporte	d organizati	on(s)						
				(iii)	(iv)								
				Type of	Is the	.	(v)	6 11	(vi)				
	(i)		(::)	organization	organızatı	on in	Dıd you not organızatı	,	Is the organizati			(v	ii)
	Name suppo		(ii) EIN	(described on lines 1- 9 above	col (ı) lıst		col (i) of		col (i) orga			A mo	unt of
	rganız		LIN	or IRC section	your gove	-	suppor		in the U			sup	port
				(see	docume	nt?							
				instructions))	Yes	No	Yes	No	Yes	No			

Total

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

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

-	ection A. Public Support	ne organization	rails to qualify t	inder the tests	listed below, pi	ease complete	Part III.)
	endar year (or fiscal year beginning	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	membership fees received (Do not include any "unusual	17,688,80			31,141,394	18,628,242	
2	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 The portion of total contributions	17,688,80	21,508,696	15,954,452	31,141,394	18,628,242	104,921,588
3	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						21,476,473
6	(f) Public Support. Subtract line 5						83,445,115
S	from line 4 ection B. Total Support						
	endar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	beginning in) ► A mounts from line 4	17,688,804	21,508,696	15,954,452	31,141,394	18,628,242	104,921,588
8	Gross income from interest,	17,000,001	21,300,030	13,331,132	31,111,331	10,020,212	101,321,300
	dividends, payments received on securities loans, rents, royalties and income from similar sources	3,704,162	4,396,075	2,354,926	1,780,250	1,131,452	13,366,865
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						118,288,453
12	Gross receipts from related activi	ties, etc (See ins	tructions)			12	50,374,576
13	First Five Years If the Form 990 is check this box and stop here	s for the organizat	ion's first, second	, thırd, fourth, or f	ifth tax year as a	501(c)(3) organ	
	ection C. Computation of Pu			d d 1		<u> </u>	
14	Public Support Percentage for 20:	-		11 column (f))		14	70 540 %
15	Public Support Percentage for 200					15	66 860 %
	33 1/3% support test—2010. If the and stop here. The organization quality 33 1/3% support test—2009. If the box and stop here. The organization	ualifies as a public ne organization dic	ly supported orga I not check the bo	inization x on line 13 or 16			► ✓
17a	10%-facts-and-circumstances tes is 10% or more, and if the organiz in Part IV how the organization me	t $-$ 2010. If the organization meets the "	janization did not facts and circums	check a box on lir tances" test, che	ck this box and s	t op here. Explain	· !
b	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organization in Part IV how the organization	anızatıon meets th	ne "facts and circi	ımstances" test, (check this box an	d stop here.	▶ □
18	Explain in Part IV how the organize supported organization Private Foundation If the organization instructions				-		•F •F

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 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 organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

▶□

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493195001122

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

Open to Public **Inspection**

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ 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

		zations complete rart iii			
				Employerı	dentification number
Par	TI-A 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 Political expenditures				
1	Provide a description of the or	ganızatıon's dırect and ındırect po	litical campaign act	ivities in Part IV	
2	Political expenditures			▶	\$
3	Employer identification of the organization SOTA ORCHESTRAL ASSOCIATION A Complete if the organization is exempt under section 501(c) or is a section 527 organization of the organization's direct and indirect political campaign activities in Part IV olitical expenditures Outside expenditures B Complete if the organization is exempt under section 501(c) or is a section 527 organization and indirect political campaign activities in Part IV olitical expenditures Complete if the organization is exempt under section 4955 S complete if the organization is exempt under section 4955 The arganization incurred a section 4955 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c) except section 501(c) inter the amount directly expended by the filing organization for section 527 exempt function activities The ret has amount directly expended by the filing organization for section 527 exempt function activities The ret has amount of the filing organization is funds contributed to other organizations for section 527 exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b The ret has a section 527 exempt function expenditures and filing organization is to viganization made payments. For each organization is listed, enter the amount paid from the filing organizations to viganization made payments. For each organization is listed, enter the amount paid from the filing organization is completed in the enter of funds. If none, enter -0- In the filing organization is received that were promptly and directly delivered to a separate political organization is received that were promptly and directly delivered to a separate political organization is funds. If none, enter -0- In the filing organization is constitution organization is funds. If none, enter -0- In the filing organization is constitution organization is constitution.				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1					• \$
2	Enter the amount of any excise	e tax incurred by organization mai	nagers under sectio	n 4955	• \$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	1720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes." describe in Part IV				
	-	ganization is exempt und	er section 501(c) except section 5	501(c)(3).
1					- \$
2		rganization's funds contributed to	o other organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ro and on Form 112	O-POI line 17h	_
-	i otal exempt function expendi	tules Add lilles I alla 2 Elitel lie	ele aliu oli Folili 112	.o-rol, illie 17b	d d
4	Did the filing organization file I Enter the names, addresses ai	Form 1120-POL for this year? nd employer identification number	· (EIN) of all section	. 527 political organizati	ons to which the filing
4	Did the filing organization file I Enter the names, addresses are organization made payments. I amount of political contribution	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an	r (EIN) of all section r the amount paid fro d directly delivered	527 political organizati om the filing organization to a separate political o	ons to which the filing n's funds Also enter the rganization, such as a
4	ame of the organization INNESOTA ORCHESTRAL ASSOCIATION Employer identification number 41-0693875				
4	Did the filing organization file I Enter the names, addresses all organization made payments I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4 5	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
4	Did the filing organization file I Enter the names, addresses all organization made payments. I amount of political contribution separate segregated fund or a	Form 1120-POL for this year? Ind employer identification number For each organization listed, enter Ins received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	527 political organization the filing organization to a separate political organization is needed, provide inform (d) A mount paid from filing organization's	ons to which the filing n's funds Also enter the irganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed	Form 5768	(election
A B	Check If the filing organization belongs to a Check If the filing organization checked bo	an affiliated group x A and "limited control" provisions apply			
	Limits on Lobbying I (The term "expenditures" means a		0	(a) Filing rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		106,348	
C	Total lobbying expenditures (add lines 1a and 1	b)		106,348	
d	O ther exempt purpose expenditures			29,542,149	
e	Total exempt purpose expenditures (add lines 1	c and 1d)		29,648,497	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both		1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	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			
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)		250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		0	
i	Subtract line 1 f from line 1 c If zero or less, ente	er - 0 -		0	

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 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expe	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount		1,000,000	1,000,000	1,000,000	3,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,500,000
c	Total lobbying expenditures		99,025	120,843	106,348	326,216
d	Grassroots non-taxable amount		250,000	250,000	250,000	750,000
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,125,000
f	Grassroots lobbying expenditures		15,250		lula C (Farra 200 a	15,250

che	edule C (Form 990 or 990-EZ) 2010				Pί	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT fi	led F	orm	5768	3
		(;	a)		(b)	
		Yes	No	, r	Amoun	it
L	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					
а	Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			-		
	Mailings to members, legislators, or the public?		\vdash	+-		
			 	+-		
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?		<u> </u>	₩		
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV		 	\vdash		
j	Total lines 1c through 1i			+-		
, 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		I			
	If "Yes," enter the amount of any tax incurred under section 4912			┨		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		I			
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01/6	1(5)			
	501(c)(6).	J)10-	<u> </u>			
			_	_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		- L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
² aı	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11

Identifier | Return Reference | Explanation

Part IV Supplemental Information

Also, complete this part for any additional information

5 Taxable amount of lobbying and political expenditures (see instructions)

5

DLN: 93493195001122

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

			Employer identification number						
MININESOTA OKCHESTRAL	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		41-0693875						
Name of the organization Employer identification number Maintenance Maintenan									
Organiza	don answered Tes to Form 99		(b) Funds and other accounts						
L Total number at 6	end of year								
Aggregate value	at end of year								
used only for cha	aritable purposes and not for the ben		ny other purpose						
		of the erganization answered "Ves" to	<u> </u>						
Preservation Protection o Preservation Complete lines 2	n of land for public use (e g , recreati f natural habitat n of open space ta-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of a c	ertified historic structure						
easement on the	last day of the tax year	Γ	Held at the End of the Year						
a Total number of o	conservation easements								
b Total acreage res	stricted by conservation easements		2b						
c Number of conse	rvation easements on a certified his	toric structure included in (a)	2c						
d Number of conse	rvation easements included in (c) ac	quired after 8/17/06	2d						
Number of conse	rvation easements modified, transfe	ے rred, released, extinguished, or terminate	d by the organization during						
the taxable year	▶								
Number of states	s where property subject to conserva	ition easement is located b							
Does the organiz	ration have a written policy regarding	the periodic monitoring, inspection, hand							
Staff and volunte	er hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during the year ▶						
A mount of expen	ses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the year ► \$						
		(d) above satisfy the requirements of sec	tion Yes No						
balance sheet, a	nd include, if applicable, the text of t	he footnote to the organization's financial							
			or Other Similar Assets.						
art, historical tre	asures, or other similar assets held	for public exhibition, education or researc	th in furtherance of public service,						
historical treasu		116, to report in its revenue statement a public exhibition, education, or research in							
(i) Revenues inc	luded in Form 990, Part VIII, line 1		► \$						
(ii) Assets includ	ded ın Form 990, Part X		▶ \$						
If the organization	•	orical treasures, or other similar assets fo S 116 relating to these items							
a Revenues include	ed in Form 990, Part VIII, line 1		▶ -\$						

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	torio	<u>cal Tre</u>	<u>asures, or O</u>	<u>the</u>	<u>r Similar Ass</u>	ets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	ne foll	owing tha	at are a significa	nt u	se of its collection	n	
а	Public exhibition		d	Γ	Loan or	exchange progr	ams			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın hov	w they	further t	the organization	's ex	empt purpose in		
5									Yes	┌ No
Par	t IV Escrow and Custodial Arrang	ements. Comple	ete ıf	the o	organiza	ation answere		es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	force	ontributio	ons or other ass	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	ible	Г		Amo	ount	
С	Beginning balance						1c			
d							1d			
e							1e			
f										
2a	-	orm 990 Part X line	<u> </u>			L			Ves	
	-		21.					'	163	, 140
			n ans	:Were	d "Yes"	to Form 990	Par	t IV line 10		
	Endownient Funds. Complete	(a)Current Year							e) Four `	/ears Back
1a	Beginning of year balance	74,599,095		74	,007,874	93,417,0	08			
Ь	Contributions	945,650		1	,194,477	822,2	17			
c	Investment earnings or losses	5,615,404		6	,335,402	-12,913,3	70			
d	Grants or scholarships									
e	Other expenditures for facilities and programs	12,147,929		6	,938,658	7,317,9	81			
f	Administrative expenses									
g	End of year balance	69,012,220		74	,599,095	74,007,8	74			
2	Provide the estimated percentage of the yea	r end balance held a	s							
а	Board designated or quasi-endowment 🕨									
ь	Permanent endowment 🕨 100 000 %									
c	0.0/									
За		ssion of the organiza	ation	that a	re held a	nd administere	d for	the		
	organization by									No
	(i) unrelated organizations			•			•			No
_	` ,						•)	l No
	,	•					٠	<u>3b</u>		<u> </u>
4) Dawt V June	10			
Par	Public exhibition Scholarly research e Other									
	Description of investment								(d) B	ook value
1a	Land		•			3,006	,334			3,006,334
b	Buildings		•			10,305	,396	9,534,378		771,018
c	Leasehold improvements		•			7,898	,005	3,449,645		4,448,360
d	Equipment		•			5,592	,113	4,837,221		754,892
							,635			57,635
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colur	nn (B), line	10(c).) .			•		9,038,239
								Schedule D (Form 9	90) 2010

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of end of year market value
(2)Closely-held equity interests	64,598,554	F
(3)Other	01,330,331	
(A) FUND OF HEDGE FUNDS & PRIVATE EQUITY	23,343,958	F
(-,,	87,942,512	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 1	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, III		
(a) Descri		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	15.)	
Part X Other Liabilities. See Form 990, Part X	X, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
UNFUNDED PENSION LIABILITY	7,509,178	
	, ,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	7,509,178	

ule D (Form 990) 2010		Page 4
t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
Total revenue (Form 990, Part VIII, column (A), line 12)	1	36,395,025
Total expenses (Form 990, Part IX, column (A), line 25)	2	31,296,820
Excess or (deficit) for the year Subtract line 2 from line 1	3	5,098,205
Net unrealized gains (losses) on investments	4	1,011,795
Donated services and use of facilities	5	
Investment expenses	6	
Prior period adjustments	7	
Other (Describe in Part XIV)	8	6,048,289
Total adjustments (net) Add lines 4 - 8	9	7,060,084
Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	12,158,289
	er Re	turn
Total revenue, gains, and other support per audited financial statements	1	43,336,776
Amounts included on line 1 but not on Form 990, Part VIII, line 12		
Net unrealized gains on investments		
Donated services and use of facilities		
Recoveries of prior year grants		
Other (Describe in Part XIV)		
Add lines 2a through 2d	2e	6,469,638
Subtract line 2e from line 1	3	36,867,138
Amounts included on Form 990, Part VIII, line 12, but not on line 1		
Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Other (Describe in Part XIV)		
Add lines 4a and 4b	4c	-472,113
	5	36,395,025
	per l	
statements	1	31,178,487
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities		
Prior year adjustments		
Other losses		
Other (Describe in Part XIV)		
Add lines 2a through 2d	2e	572,113
Subtract line 2e from line 1	3	30,606,374
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Other (Describe in Part XIV)		
Add lines 4a and 4b	4c	690,446
	5	31,296,820
	Total revenue (Form 990, Part VIII, column (A), line 12) Total expenses (Form 990, Part VIII, column (A), line 25) Excess or (deficit) for the year Subtract line 2 from line 1 Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other (Describe in Part XIV) Total adjustments (net) Add lines 4 - 8 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 XII Reconciliation of Revenue per Audited Financial Statements With Revenue per 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 Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) XIII Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial statements Amounts included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) XIII Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial statements Other (Describe in Part XIV) Add lines 4a and 4b Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) XIII Reconciliation of Fixpenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial Statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a 100,000 Prior year adjustments Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part	Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any

additional information		
Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT FUND WAS CREATED BY DONORS WHO WANTED TO FUND ANNUAL ORCHESTRA ACTIVITIES INTO PERPETUITY IF SO DESIGNATED BY THE DONOR, THESE GIFTS ARE CONSIDERED PERMANENT ENDOWMENTS, BUT INVESTMENT EARNINGS AND GROWTH ARE AVAILABLE TO SUPPORT ANNUAL ACTIVITIES THE BOARD OF DIRECTORS HAS ADOPTED THE STANDARDS OF UPMIFA IN DETERMINING THE AMOUNT TAKEN FROM ENDOWMENTS EACH YEAR FOR ACTIVITIES THE FINANCE COMMITTEE OF THE BOARD REVIEWS THE ANNUAL DRAW AMOUNT AS A PART OF THE BUDGET AND PLANNING PROCESS, AND THEN PRESENTS ITS FINDINGS TO THE BOARD OF DIRECTORS FOR APPROVAL
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION IS QUALIFIED AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AS AMENDED, (CODE) AND SIMILAR STATUTES OF MINNESOTA LAW AND, ACCORDINGLY, IS GENERALLY NOT SUBJECT TO FEDERAL OR STATE INCOME TAXES THE ASSOCIATION HAS BEEN CLASSIFIED AS A PUBLICLY SUPPORTED CHARITABLE ORGANIZATION UNDER SECTION 509(A)(1) OF THE CODE AND QUALIFIES FOR THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION FOR DONORS THE ASSOCIATION HAS ADOPTED GUIDANCE IN THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES STANDARD NO ADJUSTMENTS TO THE FINANCIAL STATEMENTS WERE REQUIRED AS A RESULT OF THE IMPLEMENTATION THIS STANDARD THE ASSOCIATION HAS NO CURRENT OBLIGATION FOR UNRELATED BUSINESS INCOME TAX THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES THE TAX RETURNS FOR THE YEARS ENDING AUGUST 31, 2008 TO 2011 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES
PART XI, LINE 8 - OTHER ADJUSTMENTS		NET PERIODIC PENSION CREDIT 690,446 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 52,652 CHANGE IN BENEFICIAL INTEREST IN NET ASSETS OF FOUNDATION & TRUST 5,305,191
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 52,652 CHANGE IN BENEFICIAL INTEREST IN NET ASSETS OF FOUNDATION & TRUST 5,305,191
PART XII, LINE 4B - OTHER ADJUSTMENTS		FUNDRAISING EVENT EXPENSES -267,291 COST OF GOODS SOLD -204,822
PART XIII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EVENT EXPENSES 267,291 COST OF GOODS SOLD 204,822
PART XIII, LINE 4B - OTHER ADJUSTMENTS		PENSION EXPENSE 690,446

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DLN: 93493195001122

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

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

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions. Inspection Name of the organization **Employer identification number** MINNESOTA ORCHESTRAL ASSOCIATION 41-0693875 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations e Solicitation of non-government grants ✓ Internet and e-mail solicitations f Solicitation of government grants Phone solicitations g Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (i) Name and address of (ii) Activity (iv) Gross receipts (vi) A mount paid to (iii) Did (v) A mount paid to individual from activity fundraiser have (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No TELEPHONE RUFFALO CODY CAMPAIGN 65 KIRKWOOD NORTH ROAD Νo 642,502 193,081 468,421 SW CEDAR RAPIDS, IA 52404 642,502 193,081 468,421 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

			(a) Event #1 BALL	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
			(event type)	(event type)	(total number)	(-),
IKU⊕	1	Gross receipts	1,057,139			1,057,139
Revenue	2	Less Charitable contributions	812,898			812,898
	3	Gross income (line 1 minus line 2)	244,241			244,241
	4	Cash prizes				
စ္က	5	Non-cash prizes				
Expenses	6	Rent/facility costs	99,104			99,104
<u>8</u>	7	Food and beverages	126,693			126,693
Direct	8	Entertainment	4,400			4,400
ā	9	Other direct expenses .	37,094			37,094
	10	Direct expense summary Add lir	nes 4 through 9 ın column	(d)		267,291
	11	Net income summary Combine li	nes 3 and 10 in column (d)	🕨	-23,050
Par	t III	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than
						•
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1	Gross revenue			(c) Other gaming	(Add col (a) through
		Gross revenue			(c) Other gaming	(Add col (a) through
penses Revenue	2				(c) Other gaming	(Add col (a) through
Expenses	2	Cash prizes			(c) Other gaming	(Add col (a) through
Expenses	2 3 4	Cash prizes			(c) Other gaming	(Add col (a) through
Expenses	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs			(c) Other gaming Yes% No	(Add col (a) through
Expenses	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	☐ Yes% ☐ No s 2 through 5 in column (d	□ Yes% □ No	Г Yes% Г No	(Add col (a) through
Direct Expenses Reveilue	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	☐ Yes% ☐ No s 2 through 5 in column (d	□ Yes% □ No	Г Yes% Г No	(Add col (a) through
Expenses	2 3 4 5 6 7 8 Ent	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comerthe state(s) in which the organization	Yes%_ No s 2 through 5 in column (on the lines 1 and 7 in column action operates gaming act	Yes% No d)	☐ Yes	(Add col (a) through col (c))
Direct Expenses	2 3 4 5 6 7 8 Ent Is t	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comerthe state(s) in which the organization discensed to operate the organization licensed to operate the," Explain	Yes%_ No s 2 through 5 in column (and the lines 1 and 7 in column ation operates gaming activities in each	Yes%_ No Mn (d)	Г Yes%	(Add col (a) through col (c))
o o	2 3 4 5 6 7 8 Ent Is t	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comer the state(s) in which the organization licensed to operate	Yes%_ No s 2 through 5 in column (and the lines 1 and 7 in column ation operates gaming act agaming activities in each	Yes%_ No d)	Г Yes%.	(Add col (a) through col (c))

11	Does the organization operate ga	aming activities with nonmembers? .		$\Gamma_{ m Yes}$ $\Gamma_{ m No}$
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
	formed to administer charitable o	gaming?		. Г _{Yes} Г _{No}
13	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility		13a	
b	An outside facility		13b	
14	Provide the name and address of records	f the person who prepares the organiza	tion's gaming/special events books and	
	Name 🟲			
	Address 🟲			
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming	
	-	· ·		. Γ_{Yes} Γ_{No}
b			tion 🟲 \$ and the	, , , , , , , , , , , , , , , , , , , ,
	amount of gaming revenue retain	ned by the third party 🟲 \$		
c	If "Yes," enter name and address	s		
	Name 🟲			
	Address ►			
16	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	> \$		
	Description of services provided			
	Director/officer	□ Employee	Independent contractor	
17	Mandatory distributions			
а		er state law to make charitable distribu		
				Tyes No
b		required under state law distributed t	o other exempt organizations or spent	
D		activities during the tax year \$	reconnect to question on Cohedule C./	
Pa	t IV Complete this part to provide instructions.)	provide additional information for	responses to question on Schedule G (see
	Identifier	ReturnReference	Explanation	

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes." to Form 990, Part IV, line 21 or 22.

Attach to Form 990

DLN: 93493195001122 OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization MINNESOTA ORCHESTRAL ASSOCIATION Employer identification number

41-0693875

Form 990, Part IV	/, line 21 for any	o Governments and recipient that received eded	l more than \$5,000.	Check this box if n	o one recipient rece	ived more than \$5,0	"Yes" to 00. Part II can be
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
MINNESOTA CITIZENS R THE ARTS2233 IIVERSITY AVENUE PAUL,MN 55114	41-1262965	501(C)(4)	68,321				ARTS LOBBYING

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 GRANTS TO ORGANIZATIONS WERE MADE TO SUPPORT LOBBYING ACTIVITIES MEETINGS ARE HELD BY THE RECIPIENTS TO DISCUSS ON-GOING EFFORTS AND CURRENT ISSUES INDIVIDUALS RECEIVED AWARDS BASED ON PERFORMANCE AT MUSICAL COMPETITIONS THE INDIVIDUALS' USE OF THE FUNDS WAS NOT MONITORED

DLN: 93493195001122

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

MIN	NNESOTA ORCHESTRAL ASSOCIATION		• •			
			41-0693875			
Pa	art I Questions Regarding Compensation	·				
					Yes	Νo
1a	Check the appropriate box(es) if the organization provided any o 990, Part VII, Section A, line 1a Complete Part III to provide					
	☐ First-class or charter travel	ousing allowance or residence for	personal use			
	<u> </u>	ayments for business use of perso				
	•	ealth or social club dues or initiati				
		ersonal services (e g , maid, chauf	feur, chef)			
b	If any of the boxes in line 1a are checked, did the organization freimbursement orprovision of all the expenses described above			1b	Yes	
2	Did the organization require substantiation prior to reimbursing officers, directors, trustees, and the CEO/Executive Director, re			2	Yes	
3		ritten employment contract				
		ompensation survey or study				
	Form 990 of other organizations	pproval by the board or compensa	tion committee			
4	During the year, did any person listed in Form 990, Part VII, Se or a related organization	ection A , line 1a with respect to th	ne filing organization			
а	Receive a severance payment or change-of-control payment from	om the organization or a related o	rganization?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqua	alified retirement plan?		4b		Νo
C	Participate in, or receive payment from, an equity-based compe	ensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the a	pplicable amounts for each item ii	n Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete For persons listed in form 990, Part VII, Section A, line 1a, did compensation contingent on the revenues of		ny			
а	The organization?			5a		Νo
b	Any related organization?		Γ	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1a, did compensation contingent on the net earnings of	d the organization pay or accrue an	ıy			
а	The organization?			6a		Νo
b	Any related organization?		Γ	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III		Γ			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did payments not described in lines 5 and 6? If "Yes," describe in l		n-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accusubject to the initial contract exception described in Regs section Part III			8		No
٥	If "Ves" to line 8 did the organization also follow the rebuttable	nresumption procedure describe	d in Regulations			

section 53 4958-6(c)?

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

For each individual whose compensation must be reported 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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) MICHAEL HENSON	(ı) (ıı)	360,283 0	0	0	11,760 0	17,818 0	389,861 0	
(2) BRYAN EBENSTEINER	(ı) (ıı)	150,278 0	0	1,893 0	5,077 0	19,676 0	176,924 0	
(3) ROBERT NEU	(ı) (ıı)	150,277 0	0	0	6,000 0	13,400 0	169,677 0	
(4) OSMO VANSKA	(ı) (ıı)	1,032,255 0	0	33,973 0	0	12,122 0	1,078,350 0	
(5) R DOUG WRIGHT	(ı) (ıı)	179,791 0	0	0	5,248 0	21,277 0	206,316 0	
(6) SARAH KWAK	(ı) (ıı)	197,718 0	0	0	5,248 0	8,527 0	211,493 0	
(7) BURT HARA	(ı) (ıı)	175,284 0	0	0	5,248 0	21,175 0	201,707 0	
(8) BASIL REEVE	(ı) (ıı)	178,023	0	0	5,248 0	8,014 0	191,285 0	
(9) MICHAEL GAST	(ı) (ıı)	176,966 0	0	0	5,248 0	15,223 0	197,437 0	
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	PART I, LINE	HOUSING ALLOWANCE - \$29,531 - OSMO VANSKA - INCLUDED IN TAXABLE COMPENSATION BUSINESS CLUB DUES - \$5,027 - MICHAEL HENSON -
	1A	MINNEAPOLIS CLUB - NOT INCLUDIBLE IN TAXABLE COMPENSATION AND UTILIZED FOR BUSINESS PURPOSES AND MEETINGS

Schedule J (Form 990) 2010

Schedule K

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493195001122

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

(Form 990)

Employer identification number

MIN	NNESOTA ORCHESTRAL ASSOC	CIATION								1-069				
Р	art I Bond Issues								<u> </u>					
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pri	ce ((f) Description of Purpose		(g) Defeased Beh		On alf of financing		ncing	
									Yes	No	Yes	No	Yes	No
A _	MINNEAPOLIS COMMUNITY DEVELOPMENT AGENCY	41-6009115		05-15-2004	1,690,0		FINANCING DI FURBISH ORCI LL			х		Х		Х
_														
Pa	art II Proceeds				T				<u> </u>					
_	0				A			В		С		D		
1	Amount of bonds retired	4												
	A mount of bonds legally defeas	sea												
3	Total proceeds of issue				1,690,0	00								
4	Gross proceeds in reserve funds													
5	Capitalized interest from proceeds													
6	Proceeds in refunding escrow													
7	Issuance costs from proceeds													
8	Credit enhancement from proc													
9	Working capital expenditures f													
10	Capital expenditures from proc	ceeas				1,690,0	00							
11	O ther spent proceeds Other unspent proceeds													
12														
<u>13</u>	Year of substantial completion	l			199		┥ "	1		ı		1	ı	
14	Were the bonds issued as part	of a current refundı	ng issue?		Yes	No X	Yes	No	Yes		No	Yes		No
 15	Were the bonds issued as part	of an advance refur	nding issue?		×									
16	Has the final allocation of proceeds been made?			X										
17	Does the organization maintain adequate books and records to support the final			X								\top		
Da	allocation of proceeds? rt IIII Private Business U	lse.												
1.6	Fill die Dusiness O				Α			В		С			D	
					Yes	No	Yes	No	Yes		No	Yes		No
1	Was the organization a partner		ra member of an L	LC, which owned	T	Х								

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Part III Private Business Use (Continued)

		Α		В		С			<u> </u>
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		×						
b	Are there any research agreements that may result in private business use of bond-financed property?		×						
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х							
Par	t IV Arbitrage								

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?								
			X						
2	Is the bond issue a variable rate issue?	Х							
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			X						
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х						
6	Did the bond issue qualify for an exception to rebate?	X							

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation

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DLN: 93493195001122

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

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

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

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization MINNESOTA ORCHESTRAL ASSOCIATION Part I **Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) (a) Name of disqualified person 1 (b) Description of transaction Corrected? Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to (g)Written (e) In Approved or from the (a) Name of interested person and (c)Original default? by board or (d)Balance due agreement? organization? principal amount purpose committee? Τо From Yes No Yes No Yes No

Part III Grants or Assistance Benefitting Interested Persons.

Complete if	the	organization	answered	"Yes"	on Form	990,	, Part IV	, line	27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c)A mount of grant or type of assistance

Part IV Business Transactions Involving Interested Perso
--

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.							
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?			
	organization			Yes	No		
(1) US BANCORP	RICHARD DAVIS, BOARD CHAIR, IS CHAIRMAN, PRESIDENT & CEO OF U S BANCORP	123,912	BANKING SERVICES		No		
(2) XCEL ENERGY	BEN FOWKE, A BOARD MEMBER, IS PRESIDENT & COO OF XCEL ENERGY	133,589	ELECTRICAL SERVICE		No		
(3) FAEGRE & BENSON LLP	STEVEN KENNEDY, A BOARD MEMBER, IS OFFICER OF FAEGRE & BENSON LLP	101,991	LEGAL SERVICES		No		

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference E	Explanation
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Schedule L (Form 990 or 990-EZ) 2010

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DLN: 93493195001122

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

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

NonCash Contributions

Name of the organization MINNESOTA ORCHESTRAL ASSOCIATION **Employer identification number**

Б-	Towns of Dunmants				41-06938/5			
РŒ	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining of amounts		ontribut	ion
1	Art—Works of art			1g				
	Art—Historical treasures							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
good	_							
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	Х	70	1,396,580	TRADING PRICE			
10	Securities—Closely held							
	stock	Х	1	417,303	SALES PRICE			
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic							
14	Q ualified conservation							
1 6	contribution—Other Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts .							
	O ther ► ()							
	Other • ()							
	Other • ()							
	Other • ()							
29	Number of Forms 8283 received by	the ora	anization during the tax vea	ar for contributions				
	for which the organization complete				29			
							Yes	No
30a	During the year, did the organization	n receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years f	rom the o	date of the initial contribution	on, and which is not require	d to be used	.		
	for exempt purposes for the entire l	holdıng p	eriod?			30a		No
b	If "Yes," describe the arrangement	ın Part I	I					
31	Does the organization have a gift a	cceptano	ce policy that requires the r	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use the contributions?	hırd partı • • •	es or related organizations	to solicit, process, or sell	non-cash	32a		No
ь	If "Yes," describe in Part II				ŀ			
	If the organization did not report re	venuesi	n column (c) for a type of p	roperty for which column (a) is checked.	,		
	describe in Part II			p = / c, for thinlen column (a	, .= 0,	,		

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

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OMB No 1545-0047

2010

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization MINNESOTA ORCHESTRAL ASSOCIATION **Employer identification number**

41-0693875

Identifier Return Reference		Explanation						
FORM 990, PART VI, SECTION A, LINE 2		BEN FOWKE, RICHARD DAVIS & CHRIS POLICINSKI - BUSINESS RELATIONSHIP						

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		THE EXECUTIVE COMMITTEE INCLUDES THE CHAIR, THE CHAIR-ELECT, THE IMMEDIATE PAST CHAIR, THE PRESIDENT, THE SECRETARY, THE TREASURER, THE PRESIDENT OF WAMSO-MINNESOTA ORCHESTRA VOLUNTEER ASSOCIATION, AND OTHER VOTING MEMBERS OF THE BOARD OF DIRECTORS THE EXECUTIVE COMMITTEE, SUBJECT AT ALL TIMES TO THE CONTROL AND DIRECTION OF THE BOARD OF DIRECTORS, HAS AND EXERCISES THE AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS OF THE CORPORATION IN THE INTERVALS BETWEEN MEETINGS OF THE BOARD

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE PRESIDENT OF THE MINNESOTA ORCHESTRAL ASSOCIATION, THE PRESIDENT OF WAMSO-MINNESOTA ORCHESTRA VOLUNTEER ASSOCIATION, THE PRESIDENT-ELECT OF WAMSO, AND THE PRESIDENT OF THE YOUNG PEOPLE'S SYMPHONY CONCERT ASSOCIATION ARE EX-OFFICIO VOTING DIRECTORS DURING THE TERMS OF THEIR OFFICES

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 WAS PREPARED BY THE STAFF OF THE MINNESOTA ORCHESTRAL ASSOCIATION IT WAS THEN REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM, WHO THEN REVIEWED IT IN DETAIL WITH THE ASSOCIATION'S AUDIT COMMITTEE. THE AUDIT COMMITTEE CONSISTS ENTIRELY OF BOARD MEMBERS AND APPROVED THE 990 ON BEHALF OF THE ENTIRE BOARD

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE GOVERNANCE COMMITTEE OF THE BOARD OF DIRECTORS ASKS EACH BOARD MEMBER TO REVIEW THE ASSOCIATION'S CONFLICT OF INTEREST POLICY AND SIGN A DISCLOSURE FORM LISTING ANY POSSIBLE CONFLICTS OF INTEREST THE SIGNED FORMS ARE REVIEWED AND DISCUSSED BY THE GOVERNANCE COMMITTEE, WHICH DECIDES WHETHER A CONFLICT OF INTEREST EXISTS IN THE EVENT OF A CONFLICT, THE DIRECTOR NOTIFIES THE BOARD CHAIR OF THE CONFLICT AND DISCLOSES ALL RELATED MATERIAL INFORMATION THAT DIRECTOR MAY NOT PARTICIPATE IN THE BOARD'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL INFORMATION AND RESPOND TO QUESTIONS THAT DIRECTOR MAY NOT PARTICIPATE IN THE CONTRACT OR TRANSACTION RELATING TO THE CONFLICT

Identifier	Return Explanation Reference									
	FORM 990, PART VI, SECTION B, LINE 15	ON AN ANNUAL BASIS, THE COMPENSATION OF THE CEO AND OTHER KEY PERSONNEL IS REVIEWED AND DETERMINED BY THE COMPENSATION/HUMAN RESOURCES COMMITTEE. IN RELATION TO COMPENSATION, THE COMMITTEE KEEPS A PERMANENT RECORD OF PROCEEDINGS, INCLUDING A REPORT AND RECOMMENDATIONS, AS WELL AS ANY MAJOR DECISIONS WHEN THERE IS A NEW CONTRACT, THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS ALSO REVIEWS THE COMPENSATION, THEN RECOMMENDS IT FOR APPROVAL TO THE EXECUTIVE COMMITTEE AND THE FULL BOARD OF DIRECTORS. THE REVIEW PROCESS WAS LAST UNDERTAKEN IN 2011								

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE SHARED UPON REQUEST WITH ANY ENTITY, INCLUDING INDIVIDUALS, FOUNDATIONS AND CORPORATIONS THE FINANCIAL STATEMENTS ARE ALSO RELEASED TO THE PUBLIC IN A SUMMARIZED VERSION THROUGH AN ANNUAL REPORT AND THROUGH THE 990, WHICH IS AVAILABLE ON THE INTERNET

ldentifier	Return Reference	Explanation
		NET UNREALIZED GAINS ON INVESTMENTS 1,011,795 NET PERIODIC PENSION CREDIT 690,446 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 52,652 CHANGE IN BENEFICIAL INTEREST IN NET ASSETS OF FOUNDATION & TRUST 5,305,191 TOTAL TO FORM 990, PART XI, LINE 5 7,060,084

Software ID: Software Version:

EIN: 41-0693875

Name: MINNESOTA ORCHESTRAL ASSOCIATION

Compensated Employees, and Independent Contractors										
(B) Average hours		tion ((che	′)	_		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation	
week or director		Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
40 00	х		x				360,283	0	29,578	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
1 00	Х		х				0	0	0	
1 00	Х						0	0	0	
1 00	Х						0	0	0	
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1 00	Х						0	0	0	
1 00	Х		х				0	0	0	
1 00	Х						0	0	0	
	Average hours per week 40 00 1 00 1 00 1 00 1 00 1 00 1 00 1	Average hours per week 40 00	Average hours per week 40 00	Average hours per week Average hours per week Individual trustee X X Average hours per week Individual trustee X Average hours rustee X Average rustee	Average hours per week Average hours per week Average chours per week Average choins Institutional Trustee Average Average choins Average choins	Average hours per week	Average hours per week	Average hours per week hours per week week	Average Position (check all to that a pply) Position (check all to that all to tha	

Compensated Employees, a		ient C			LOFS			(D)	(F)	(5)
Name and Title	(B) Average hours per		tion (that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
CAMERON FINDLAY DIRECTOR	1 00	Х						0	0	0
DOLLY FITERMAN DIRECTOR	1 00	Х						0	0	0
BEN FOWKE DIRECTOR	1 00	Х						0	0	0
LUELLA GOLDBERG DIRECTOR	1 00	Х						0	0	0
FRANCK GOUGEON DIRECTOR	1 00	Х						0	0	0
PAUL GRANGAARD DIRECTOR	1 00	Х						0	0	0
JANE GREGERSON DIRECTOR	1 00	Х						0	0	0
JEFFREY GREINER DIRECTOR	1 00	Х						0	0	0
N BUD GROSSMAN DIRECTOR	1 00	Х						0	0	0
SUSAN HAGSTRUM DIRECTOR	1 00	Х						0	0	0
RENEE LEJEUNE HALLBERG DIRECTOR	1 00	Х						0	0	0
JANIS HEANEY DIRECTOR	1 00	Х						0	0	0
JAYNE HILDE DIRECTOR	1 00	Х						0	0	0
SHADRA HOGAN DIRECTOR	1 00	Х						0	0	0
MARY HOLMES DIRECTOR	1 00	Х						0	0	0
KAREN HUBBARD DIRECTOR	1 00	Х						0	0	0
HELLA MEARS HUEG DIRECTOR	1 00	Х						0	0	0
JAY IHLENFELD DIRECTOR	1 00	Х						0	0	0
PHILIP ISAACSON DIRECTOR	1 00	Х						0	0	0
PATRICIA DORN JAFFRAY DIRECTOR	1 00	Х						0	0	0
NANCY JONES DIRECTOR	1 00	Х						0	0	0
M JOANN JUNDT DIRECTOR	1 00	Х						0	0	0
DOUGLAS KELLEY DIRECTOR	1 00	Х						0	0	0
STEVEN KENNEDY DIRECTOR	1 00	Х						0	0	0
LLOYD KEPPLE DIRECTOR	1 00	х						0	О	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and	d Independ	ent C	ontr	act	ors			ı		
(A) Name and Title	(B) Average hours per		tion (that a	che	′)	_	1	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
JOSEPH LAPENSKY DIRECTOR	1 00	Х						0	0	0
MARY LAZARUS DIRECTOR	1 00	х						0	0	0
DOUGLAS LEATHERDALE DIRECTOR	1 00	×						0	0	0
ALLEN LENZMEIER DIRECTOR	1 00	х						0	0	0
NANCY LINDAHL SECRETARY	1 00	Х		х				0	0	0
RONALD LUND DIRECTOR	1 00	Х						0	0	0
JOHN MACHUZICK DIRECTOR	1 00	Х						0	0	0
WARREN MACK DIRECTOR	1 00	Х						0	0	0
HARVEY MACKAY DIRECTOR	1 00	Х						0	0	0
JUDY MAHONEY DIRECTOR	1 00	Х						0	0	0
ROBERTA MANN BENSON DIRECTOR	1 00	Х						0	0	0
JAN MCDANIEL DIRECTOR	1 00	х						0	0	0
JAMES MELVILLE DIRECTOR	1 00	Х						0	0	0
ERIC MERCER DIRECTOR	1 00	Х						0	0	0
ANNE MILLER DIRECTOR	1 00	Х						0	0	0
HUGH MILLER DIRECTOR	1 00	Х						0	0	0
JOAN MONDALE DIRECTOR	1 00	Х						0	0	0
SUSAN MORRISON DIRECTOR	1 00	Х						0	0	0
BETTY MYERS DIRECTOR	1 00	Х						0	0	0
MARILYN NELSON DIRECTOR	1 00	Х						0	0	0
BRUCE NICHOLSON DIRECTOR	1 00	Х						0	0	0
BECKY ODLAND DIRECTOR	1 00	Х						0	0	0
DALE OLSETH DIRECTOR	1 00	Х						0	0	0
ANITA PAMPUSCH DIRECTOR	1 00	Х						0	0	0
ERIC PAULSON DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week		(C tion (hat a	che		II		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former				
ROSALYND PFLAUM DIRECTOR	1 00	Х						0	0	0	
SUSAN PLATOU DIRECTOR	1 00	Х						0	0	0	
CHRIS POLICINSKI DIRECTOR	1 00	×						0	0	0	
TERI POPP DIRECTOR	1 00	Х						0	0	0	
GREGORY PULLES DIRECTOR	1 00	Х						0	0	0	
MICHAEL ROOS DIRECTOR	1 00	Х						0	0	0	
JON SALVESON DIRECTOR	1 00	Х						0	0	0	
JO ELLEN SAYLOR DIRECTOR	1 00	Х						0	0	0	
DOUGLAS SCOVANNER DIRECTOR	1 00	Х						0	0	0	
WENDY SEYB DIRECTOR	1 00	Х						0	0	0	
GORDON SPRENGER DIRECTOR	1 00	Х						0	0	0	
JOHN STANOCH DIRECTOR	1 00	Х						0	0	0	
MARY SUMNERS DIRECTOR	1 00	Х						0	0	0	
GEORGIA THOMPSON DIRECTOR	1 00	Х						0	0	0	
JAMES WAFLER DIRECTOR	1 00	Х						0	0	0	
MAXINE WALLIN DIRECTOR	1 00	Х						0	0	0	
WENDY WENGER DANKEY DIRECTOR	1 00	Х						0	0	0	
DAVID WICHMANN TREASURER	1 00	Х		х				0	0	0	
JOHN WILGERS DIRECTOR	1 00	Х						0	0	0	
THERESA WISE DIRECTOR	1 00	Х						0	0	0	
NICOLE WOODHOUSE DIRECTOR	1 00	Х						0	0	0	
PAUL ZELLER DIRECTOR	1 00	Х						0	0	0	
BRYAN EBENSTEINER VICE PRESIDENT - FINANCE	40 00			Х				152,171	0	24,753	
ROBERT NEU VP & GENERAL MANAGER	40 00			х				150,277	0	19,400	
OSMO VANSKA MUSIC DIRECTOR	40 00				х			1,066,228	0	12,122	

(A) Name and Title	(B) Average hours per week	o Individual trustee or director		')	Highest compensat	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
R DOUG WRIGHT MUSICIAN	40 00				<u>**</u> ×		179,791	0	26,525
SARAH KWAK MUSICIAN	40 00				х		197,718	0	13,775
BURT HARA MUSICIAN	40 00				Х		175,284	0	26,423
BASIL REEVE MUSICIAN	40 00				Х		178,023	0	13,262
MICHAEL GAST MUSICIAN	40 00				Х		176,966	0	20,471