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Form **990**

Department of the Treasury

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)

2011

Open to Public Inspection

	Revenue		landar year or tay year baginning 07-01-2011 and anding 06-20-2	012			Inspection
	eck if ap		lendar year, or tax year beginning 07-01-2011 and ending 06-30-20 C Name of organization	012	D Emplo	oyer id	dentification number
	dress cha	•	NEW WORLD SYMPHONY INC C/O DAVID PHILLIPS		59-2	8090	56
_	me chan	_	Doing Business As		E Teleph	none r	number
	tıal returi		Number and street (so D.O. hour formula mot delicensed to street address)	-	(305)	428	-6700
Tei	mınated	I	Number and street (or P O box if mail is not delivered to street address) Room 500 17TH STREET	/suite	G Gross	receipt	rs \$ 25,369,736
_	iended re plication	eturn pending	City or town, state or country, and ZIP + 4 MIAMI BEACH, FL 33139				
			F Name and address of principal officer	H(a)		retu	rn for
			DAVID PHILLIPS		affiliates?	, , , , ,	⊤Yes ▼ No
			500 17TH STREET MIAMI BEACH,FL 33139	H(b)	Are all affiliates	inclu	ided?
				1 ' '			t (see instructions)
I Ta	x-exem _l	pt status	✓ 501(c)(3)		Group exemp		
J W	ebsit e	: 🕨 wwv	v nws edu				
K For	m of org	anızatıon	✓ Corporation Trust Association Other ►	L Year	of formation 19	987	M State of legal domicile FL
Pa	rt I	Sum	mary				
Governance	т	HENEV	escribe the organization's mission or most significant activities N WORLD SYMPHONY, AMERICA'S ONLY FULL-TIME ORCHESTR GIOUS MUSIC PROGRAMS FOR SUCCESSFUL CAREERS IN ORCH				FTED GRADUATES OF
oye.	2 0	heck th	is box ┡┌ if the organization discontinued its operations or dispose		nan 25% of its	net	assets
ಭ ತ			of voting members of the governing body (Part VI, line 1a)		_5 /6 Of its	3	34
Activities &			of independent voting members of the governing body (Part VI, line 1			4	31
Ě			mber of individuals employed in calendar year 2011 (Part V, line 2a)			5	0
<u>ş</u>	6 T	otal nur	mber of volunteers (estimate if necessary)			6	142
4	7a ⊺	otal unr	related business revenue from Part VIII, column (C), line 12			7a	-483,341
	ьN	let unre	lated business taxable income from Form 990-T, line 34			7b	-778,925
					Prior Year		Current Year
	8	Contril	butions and grants (Part VIII, line 1h)		13,468,	936	12,522,904
를	9	Progra	m service revenue (Part VIII, line 2g)		1,976,		1,640,779
Revenue	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)		5,653		939,867
<u> </u>	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,918,		-621,783
	12		evenue—add lines 8 through 11 (must equal Part VIII, column (A), l	line	23,016	757	14,481,767
	13		and similar amounts paid (Part IX, column (A), lines 1-3)		1,494,		1,456,619
	14		ts paid to or for members (Part IX, column (A), line 4)	•	1,707,	0	1,430,019
	15		es, other compensation, employee benefits (Part IX, column (A), line	s 5-			
\$		10)			1,235,	657	1,476,297
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)			0	0
ੜੇ	b	Total fu	ndraising expenses (Part IX, column (D), line 25) 🕨 1,368,091				
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,172,	,387	15,932,489
	18	Totale	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	16,902,	,626	18,865,405
	19	Reveni	ue less expenses Subtract line 18 from line 12		6,114,	131	-4,383,638
Net Assets or Fund Balances				Begi	nning of Curre Year	ent	End of Year
100	20	Totala	assets (Part X, line 16)		260,432,	,983	265,582,074
A.A.	21		iabilities (Part X, line 26)		31,245,	_	41,461,289
žŽ	22		sets or fund balances Subtract line 21 from line 20		229,187,		224,120,785
Pai	rt II	Sign	ature Block			'	
know	ledge a ledge.	***** Signa	erjury, I declare that I have examined this return, including accompanying f, it is true, correct, and complete. Declaration of preparer (other than off ** ture of officer D PHILLIPS SR VP & CFO				
			or print name and title				
—— Paid		Prepare signatur		Check if self-employed	(see ins		payer identification number ns)
	arer's	1	ame (or yours MARCUM LLP		•		
Use	Only		mployed), P ONE SE THIRD AVENUE 10TH FLOOR		EIN F		
			,		Phone n	ю 🕨	(305) 995-9600
May ·	the IRS	i discus	MIAMI, FL 33131 s this return with the preparer shown above? (see instructions) .				✓ Yes

Part TTT	Statement of	Program Service	Accomplishments
	Ota to III o II to o I	og. a oc. v.cc	Accomplising

) (Expenses \$

Briefly describe the organization's mission

The New World Symphony, America's only full-time orchestral academy, prepares gifted graduates of distinguished music programs for leadership roles in orchestras and ensembles throughout the world. Organization Overview. The New World Symphony (NWS), America's orchestral academy, offers a three-year postgraduate fellowship program of multidisciplinary training in musical technique, performance, audience development, and community engagement activities. Each year, NWS recruits an average of 100 artists and professionals in the field for residencies as visiting faculty to mentor, coach, and/or perform with the Fellows. These include some of the world's leading conductors, composers and soloists, as well as professionals representing a wide range of music-related disciplines who work with Fellows in areas such as community engagement, performance psychology, musician health, and arts administration. Organization Activities. The NWS fellowship program offers an experiential curriculum invo

	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

including grants of \$

Did the organization undertake any significant program services during the year which were not listed on

11,606,624

Artistic Programming A unique laboratory for musical expression, the New World Symphony (NWS) is shaping the future of classical music performance and presentation using the advanced technologies of its new campus, the Frank Gehry-designed New World Center NWS challenges the traditional concert scenario, creating new audiences by breaking down barriers to classical music, and generating new ideas about the way music is taught, presented, and experienced While preparing highly-gifted graduates of distinguished music programs for leadership roles in orchestras and ensembles around the world, NWS has become an international cultural hub where ideas about music, architecture, and art intersect NWS is dedicated to the artistic, personal, and professional development of outstanding instrumentalists. This Fellowship program provides gifted young musicians with intensive post-graduate training, modeled after the demands of a professional orchestra. Fellows have the opportunity to enhance their education with the finest professional preparation through a wide range of performance and instructional activities. Under the artistic direction of NWS Founder Michael Tilson Thomas, NWS Fellows and nearly 80,000 residents and tourists in this region enjoy in-depth exposure to traditional and modern repetitoric, with the active involvement of leading guest conductors, soloists, and coaches. The relationships with these artists are extended through NWS' pioneering experimentation with distance learning via Internet2. Co-founded in 1987 by Michael Tilson Thomas and Ted Arison, the New World Symphony is celebrating its 25th Anniversary having launched the careers of more than 800 musicians. In North America, they are members of such essential solones as the Boston Symphony, Cleveland Orchestra, Los Angeles Philharmonic, National Symphony in Washington, D. C., Metropolitan Opera Orchestra, and the San Francisco Symphony. Their placement in foreign orchestras in chamber music, music education, and arts management. New World Symphony'

1,456,619) (Revenue \$

4b (Code) (Expenses \$ 3,204,412 including grants of \$) (Revenue \$ 1,640,779)

Orchestral Training NWS offers postgraduate fellowships for 86 positions - violin (26), viola (10), cello (9), bass (7), flute (3), oboe (3), clarinet (3), bassoon (3), hom (5), trumpet (3), trombone (2), bass trombone (1), tuba (1), timpani (1), percussion (4), harp (1), piano (1), conducting (1), audio engineering (1), and library (1). In a highly competitive process, approximately 30 gifted young musicians are selected annually from 1,200 applicants to participate in NWS' postgraduate fellowship program. NWS Fellows are music graduates from top universities and conservatories, meeting NWS' undergraduate degree requirement at a minimum, although many hold postgraduate degrees in music. NWS Fellowships are awarded on a season-to-season basis for up to three seasons, and the package of benefits includes a weekly stipend, a grant for relocation assistance, instrument loans, and free private accommodations at furnished apartments in nearby NWS-owned facilities. NWS' advanced professional development program helps Fellows to further cultivate the full complement of skills and qualifications required of successful 21st century musicians. During the 2011-12 Season, 25 NWS Fellows won orchestral positions in such institutions as the St. Louis, Charleston, Ft. Worth, Detroit, Bergen (Norway) and Richmond symphonies, and the Kennedy Center Opera House, New York City Ballet, Houston Grand Opera, and Manchester. Camerata Chamber orchestras. Additionally, this past season saw 10 NWS alumni win new positions. For the past five years, a seasonal average of 24 Fellows have won jobs in orchestras and ensembles worldwide. Having risen from an average of 15 in 2000, this metric is especially impressive given the recession-driven reduction in the number of job openings in professional ensembles.

4c (Code) (Expenses \$ 144,203 including grants of \$) (Revenue \$)

Audience Development and Community Engagement The artistic and educational activities associated with the professional development aspect of NWS' fellowship program are complemented with comprehensive community engagement initiatives, which serve a dual purpose in meeting the organization's mission 1) To enrich the cultural vitality of the community by introducing nontraditional audiences to classical music and fostering appreciation and understanding of this art form among our patrons, 2) To promote community involvement and leadership among NWS Fellows and help them become effective and enthusiastic advocates for classical music in the communities in which they secure professional positions. NWS is proud to offer several programs tailored for students. Each year NWS Fellows gain invaluable experience teaching, coaching, and performing for students in the community through a variety of initiatives including private lessons, intimate inclassroom presentations, an educational daytime concert series and webcast, a side-by-side and concert ocompetition, an adult lecture series, and rehearsal observations. In the 2011-2012 school year, over 15,000 students participated in NWS programs, the majority of whom were students in Mami-Dade and Broward counties. Children's programming includes. Education Concerts. The NWS Education concerts are designed to be an inspirational, educational experience outside the classroom for grades 6-12. These thematic daytime concerts will introduce major orchestral works and composers to students and teachers from Miami-Dade and Broward counties. A study guide is sent to all participating classes and round-trip bus transportation is provided free of charge. Side-By-Side Ensemble New World Symphony is pleased to offer advanced young instrumentalists grades 7 through 12 an opportunity to perform in the Side by Side Ensemble Concert, where they will be play alongside NWS fellows, developing a musical working relationship as they prepare and perform orchestral works of the highest caliber. M

4d	Other program services				
	(Expenses \$	including grants of \$) (Revenue \$)	

e Total program service expenses►\$ 14,955,239

Part IV	Checklist o	f Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	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	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		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		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	Yes	
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI.</i>	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		Νο
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		Νο
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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		Νο
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	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, Part 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, Part 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? If "Yes," complete Schedule G, Part I	17		No
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
Ь	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	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		No
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	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		No
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			
	<i>IV</i>	28a		Νο
	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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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? If "Yes," complete Schedule R, Part I	33	Yes	
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
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	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	35b		No
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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	· · · · · · · ·			
	126			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1 b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			_
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year ⁹	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3Ь	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account or securities	4a		No
	account)?			NO
Ь	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			
F-	Was the organization a party to a prohibited toy chalter transaction of any time discuss the transaction	E-		NI -
5a 	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		
_		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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			
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
-	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
h	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand			
	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
L.	If "Vee, " has it filed a Ferm 730 to report these naumented If "Ne " provide an explanation in Cabedule O	4 41.		

Part VI 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

	Check it Schedule O contains a response to any question in this Part VI		. 10	
_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			
b	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		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Νο
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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	
ь	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		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
<u></u>	evenue Code.)			
			V	NI.
100	Did the organization have legal chanters, branches, or affiliates?	100	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt		Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b	Yes Yes Yes	
11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed▶FL , NY
- 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 made these available Check all that apply

Own website 🔽 Another's website 🔽 Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 DAVID PHILLIPS 500 17TH STREET

MIAMI BEACH, FL 33139 (305) 428-6751

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

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

(A) Name and Title	(B) Average hours per week (describe hours	Position more unless	on (de thai	C) o not n one son er ar	che box is bo id a tee)	eck x, oth		(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
	for	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		,	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 per week (describe	mor unles an	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) ortable ensation om the zation (W-	(W- 2/1099-		(F) Estima amount o compens from organizat relat	ated fother sation the ion and	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)	organiza			
See /	Addıtıonal Data Table														
							-								
							<u> </u>	_				-			
				_			<u> </u>								
							<u> </u>								
1b	Sub-Total		<u> </u>	<u>. </u>		<u> </u>		<u> </u> ▶							
С	Total from continuation sheets					•		P							
d 	Total (add lines 1b and 1c). Total number of individuals (incl \$100,000 of reportable compen		nıted to	thos	e lıs		. above) who	o receive	1,528,658 ed more tha	n	0		53,861	
													Yes	No	
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci	·				-		-	_	st compens	ated employee	3		No	
4	For any individual listed on line organization and related organiz											4	Yes		
5	Did any person listed on line 1a services rendered to the organiz									-	r individual for	5		N o	
	ection B. Independent Con	tractors											•		
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper n the organizatio													
	-	(A) me and business add	dress							Descr	(B) ription of services		(C Comper		
1020	TOTALSOURCE 0 SUNSET DRIVE 1I, FL 33173									EMPLOYEE LE	EASING		5	5,518,262	
FAC0 6600	NAME OF THE PROPERTY OF THE PR									CONS CONT	RACTOR		3	3,369,015	
COLU 165 V	JMBIA ARTISTS MANAGEMENT LLC WEST 57TH STREET YORK, NY 10019									ARTISTS SER	VICES			669,680	
HINE PO B										PROJECT MA	NAGER		559,513		
STEA	RNS WEAVER MILLER									LEGAL SERVI	CES			540 651	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►8

Form **990** (2011)

	Form 990 (2011) Page 9 Part VIII Statement of Revenue							
Part	<u> </u>	Statement o	т кечепие		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ 22	1a	Federated camp	paigns 1a					
돌	ь	Membership du	es 1b					
βΣ	С	Fundraising eve	ents 1 c	701,615				
#£	d	Related organiz	ations 1d					
⊞§	e	Government grants	s (contributions) 1e	1,397,921				
lion r si	f		ons, gifts, grants, and 1f	10,423,368				
ë j E e	g	sımılar amounts no Noncash contri	butions included in					
Contributions, gifts, grants and other similar amounts		lines 1a-1f \$	2,500					
ဝမ	h			· · · •	12,522,904			
<u> </u>				Business Code				
enu	2a	CONCERT REVENU	ES	711110	1,500,842	1,500,842		
₽ev	ь	APPLICATION FEES		611600	43,025	43,025		
<u> </u>	c	BOX OFFICE POSTA	AGE AND HANDLING	561000	45,186	45,186		
že.	d	NEW WORLD CENT	ER TOURS	711110	14,285	14,285		
<u> </u>	e	OTHER		711110	37,441	37,441		
Program Service Revenue	f	All other progra	ım service revenue					
ž	g	Total. Add lines	s 2a – 2f		1,640,779			
	3	Investment inc	ome (including dividend	ds, interest				
		and other simila	aramounts)	▶ [1,210,217			1,210,217
	4	Income from inves	tment of tax-exempt bond p	proceeds -	0			
	5	Royalties			0			
	ر ا	C	(ı) Real 1,342,156	(II) Personal				
	6a b	Gross rents Less rental	1,825,497					
		expenses Rental income	-483,341					
	С	or (loss)			400 044		400.044	
	d	Net rental incor	me or (loss)		-483,341		-483,341	
	7a	Gross amount from sales of assets other than inventory	(i) Securities 8,474,688	(II) O ther				
	b	Less cost or other basis and sales expenses	8,745,038					
	c	Gain or (loss)	-270,350					
	d	Net gaın or (los	s)		-270,350			-270,350
enne	8a	Gross income fi events (not incl \$	luding					
Other Revenue	b	See Part IV , lin		178,992 317,434				
0	С		loss) from fundraising (events 🟲	-138,442			563,173
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a					
	b		penses b		0			
	10a	Gross sales of	loss) from gaming activ	vities	0			
		returns and allo	wances .					
	b c	=	oods sold b loss) from sales of inve	antory -	0			
	_	Miscellaneous		Business Code	- Y			
	11a							
	ь							
	С							
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d		0			
	12	Total revenue.	See Instructions	•	14,481,767	1,640,779	-483,341	1,503,040

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 0 Grants and other assistance to individuals in the United States See Part IV, line 22 1,456,619 1,456,619 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 1,476,297 581,032 422,932 472,333 kev employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 0 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 0 Other employee benefits 0 10 Fees for services (non-employees) 11 Management 293,062 293,062 49,375 49,375 Legal Accounting 48,686 48,686 Lobbying 0 Professional fundraising See Part IV, line 17 . . 0 0 Investment management fees 0 g 234,732 11,451 223,281 12 Advertising and promotion . . . 113,526 13,218 13 Office expenses 88,163 12,145 440,251 306,281 87,883 14 Information technology 46,087 15 Royalties . . 0 536,906 16 536,906 142,281 118,717 17 11,786 11,778 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 247 19 Conferences, conventions, and meetings 247 248,996 248,996 20 21 Payments to affiliates 0 22 Depreciation, depletion, and amortization 4,671,645 4,671,645 23 1,131,038 1,060,393 70,645 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f Ifline 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) LEASED EMPLOYEES 4,323,432 1,190,727 692,617 2,440,088 CONDUCTORS/SOLOISTS/COACHES 1,654,706 1,654,706 281,695 281,695 USHERS & SECURITY FOR CONCERTS 337,011 337,011 d e All other expenses 1,424,900 1,236,481 55,288 133,131 Total functional expenses. Add lines 1 through 24f 25 18,865,405 14,955,239 2,542,075 1,368,091 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

¥

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

0

0

0

0

0

0

0

0

0

Form 990 (2011) Part X Balance Sheet (A) (B) Beginning of year End of year 11,509,116 Cash—non-interest-bearing 788,919 1 2 916.531 2 531.308 Savings and temporary cash investments 8,275,820 8,170,721 3 898.405 4 2.842.350 Accounts receivable, net . 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 6 0 7 0 8 8 9 1,149,568 209.083 Prepaid expenses and deferred charges 9 Land, buildings, and equipment cost or other basis Complete 188 068 729 10a Part VI of Schedule D 10a 10b 12,563,446 159,383,781 10c 175,505,283 b Less accumulated depreciation 56,562,633 56,303,734 11 11 21,660,797 12 21,173,422 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 76,332 14 14 57,254 15 15 260,432,983 16 16 265,582,074 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 5,236,585 1,136,605 17 17 Accounts payable and accrued expenses . 18 18 19 818,344 19 823,684 20 0 20 21 0 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 25.190.529 23 39.501.000 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D 26 31,245,458 26 41,461,289 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balance through 29, and lines 33 and 34. 141,250,890 27 27 Unrestricted net assets 136,520,412 10,649,908 9,368,324 28 Temporarily restricted net assets 28 Fund 77,286,727 29 78,232,049 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds

224.120.785

265,582,074

229.187.525

260.432.983

33

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		14.4	181,76
2	Total expenses (must equal Part IX, column (A), line 25)	2			365,40
3	Revenue less expenses Subtract line 2 from line 1	3		-4,3	383,63
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		229,1	187,52
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 6	583,10
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		224,1	120,78
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
ь	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			
3a	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		Νο
Ь	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	equired	3b	_	

Employer identification number

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Name of the organization

NEW WORLD SYMPHONY INC

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.

OMB No 1545-0047

Inspection

C/O [AVID PI	HILLIPS							59-28090	56			
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganızatıons	must comp	olete this p	art.) See ın	struct	ions		
The	organı	zatıon ıs	not a privat	te foundation becaus	eıtıs (Forl	ınes 1 throu	gh 11, check	only one bo	x)				
1	Γ	A churc	ch, conventi	on of churches, or as	ssociation of	churches s	ection 170(b)(1)(A)(i).					
2	<u>~</u>	A scho	ol described	in section 170(b)(1	.)(A)(ii). (A t	tach Schedu	le E)						
3	Γ			perative hospital se	-								
4	Γ			n organization operat ty, and state	ed in conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1	L)(A)(iii). Ente	erthe	
5	Г	An orga	anızatıon op	erated for the benefi	t of a college	or universit	y owned or o	perated by a	governmenta	al unit	describ	— ed ın	
		section	170(b)(1)(A)(iv). (Complete P	art II)								
6		A feder	al, state, or	local government or	government	al unit desc	ıbed ın secti	on 170(b)(1)(A)(v).				
7	Γ	describ	ed in	at normally receives A)(vi) (Complete P		il part of its	support from	a governme	ntal unit or fro	om the	genera	l public	:
8	Г			described in section		A)(vi) (Com	nnlete Part II	```					
9	, T		· -	at normally receives			•	•	outions, mem	bershi	p fees.a	nd aro	ss
	•	-		ities related to its ex	• •				•			-	
		ıts sup	port from gr	oss investment inco	me and unre	ated busine	ss taxable in	come (less s	section 511 t	ax) fro	m busın	esses	
		acquire	d by the org	janızatıon after June	30,1975 S	ee sect ion 5	09(a)(2). (C	omplete Part	tIII)				
10	Γ	Anorga	anızatıon or	ganızed and operated	lexclusively	to test for p	ublic safety	Seesection	509(a)(4).				
11	Γ	one or the box	more public	ganized and operated ly supported organiza bes the type of supp b Type I	atıons descr ortıng organ	ıbed ın sectı ı <u>za</u> tıon and o	on 509(a)(1)	or section 5 s 11e throug	509(a)(2) Se jh 11h	e sect		(a)(3).	Check
e	Γ	By che	cking this b	ox, I certify that the	organızatıon	ıs not contr	olled directly	or indirectly	y by one or m	ore dis	squalıfıe	d pers	ons
				on managers and otl	ner than one	or more pub	licly supporte	ed organizati	ions describe	d in se	ection 5	09(a)(1) or
f			ı 509(a)(2) rganızatıon	received a written de	etermination	from the IRS	Sthatitis a ⁵	Type I. Type	II or Type I	IIsup	portina	organiz	ation.
-			:his box					. , p = -, . , p =	, , , , , ,		p	- · 	<u> </u>
g			-	2006, has the organi	zation accep	ted any gift	or contribution	on from any	of the				
			ig persons? Irson who di	rectly or indirectly c	ontrols aith	eralone orto	ngether with i	narsons das	cribed in (ii)			Yes	No
				governing body of th			-	persons des	C 115 C G 111 (11)		11g(i)	163	140
				er of a person descri		_					11g(ii)		
		• •	•	led entity of a perso	• •		bove?				11g(iii)	+	
h				ng information about									<u> </u>
						•	, ,						
	(i) Name suppor rganiz	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga in the U	on in inized		A mo	ii) unt of port?
				(see instructions))	Yes	No	Yes	No	Yes	No			
			1	· · · · · · · · · · · · · · · · · · ·			ı	1	1				

Total

ınstructıons

	Support Schedule (Complete only if yo	u checked the	box on line 5,	7, or 8 of Part	I or if the organ	nization f	ailed to	qualify
	under Part III. If the	organization	rails to quality t	<u>inder the tests</u>	listed below, pi	ease cor	npiete	Part III.)
	ection A. Public Support endar year (or fiscal year beginning	1	1	1	1			
Car	in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	ınclude any "unusual							
	grants ")							
2	Tax revenues levied for the organization's benefit and either							
	paid to or expended on its							
	behalf							
3	The value of services or facilities							
_	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by							
	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5 from							
	line 4							
_ <u>S</u>	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	11	(f) Total
	ın)	(-,	(-,	(0, 2000	(-,	(-,		
7	A mounts from line 4							
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties							
	and income from similar							
	sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income (Explain in Part							
	IV) Do not include gain or loss from the sale of capital assets							
11	Total support (Add lines 7							
	through 10)							
12	Gross receipts from related activities	es, etc (See ins	tructions)		•	12		
13	First Five Years If the Form 990 is t	or the organizati	on's first, second	. third. fourth. or	fifth tax vear as a	501(c)(3) organi	zation.
	check this box and stop here	.	· · · · · · · · · · · · · · · · · · ·	,,,	,	(- / (-	,	▶ ┌
_ <u>s</u>	ection C. Computation of Pub							
14	Public Support Percentage for 2011	. (line 6 column	(f) divided by line	11 column (f))		14		
15	Public Support Percentage for 2010) Schedule A , Pa	rt II, line 14			15		
16a	33 1/3% support test—2011. If the				line 14 is 33 1/3%	6 or more	, check '	
_	and stop here. The organization qua		, ,,					▶ ┌
b	33 1/3% support test—2010. If the				6a, and line 15 is	33 1/3% (or more,	
17-	box and stop here. The organization				no 12 165 16	الحميما	1.4	▶
т/а	10%-facts-and-circumstances test- is 10% or more, and if the organization							
	in Part IV how the organization mee							ted
	organization	to the lacts diff	a circumstances	cost The Organia	Lation quanties as	a publicly	Sappor	red ▶□
ь	10%-facts-and-circumstances test-	-2010. If the ora	anızatıon dıd not	check a box on li	ne 13, 16a, 16b.	or 17a and	d line	• •
_	15 is 10% or more, and if the organ							
	Explain in Part IV how the organizat	ion meets the "f	acts and circums	tances" test Th	e organızatıon qua	lıfıes as a	publich	
	supported organization			بمد می	4-11			► □
18	Drivate Foundation If the organizati	on did not chack	' a hov on line 13	165 166 1757	ar 1 /h chack thic	nov and c	- 0 0	

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (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 persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 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) 2007 **(b)** 2008 (d) 2010 (e) 2011 (c) 2009 (f) Total ın) A mounts from line 6 10a Gross income from interest, 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 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 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 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16

S	Section D. Computation of Investment Income Percentage					
17	Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17				
18	Investment income percentage from 2010 Schedule A, Part III, line 17	18				

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2010. 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 explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test						
	Explanation						

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493130016253

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Name of the organization

Employer identification number

	VORLD SYMPHONY INC			,		
C/O D	AVID PHILLIPS			2809056		
art	Organizations Maintaining Donor A		Funds	or Accounts	. Comple	te if the
	organization answered "Yes" to Form 99	(a) Donor advised funds		(b) Funds and o	therees	ınto
_	atal number at and aftern	(a) Donor advised funds	<u>'</u>	D) Fullus allu o	ther accou	11115
	otal number at end of year					
	ggregate contributions to (during year)					
	ggregate grants from (during year)					
А	ggregate value at end of year					
	Old the organization inform all donors and donor adviunds are the organization's property, subject to the	<u> </u>	onor advı	sed	☐ Yes	┌ No
ι	Old the organization inform all grantees, donors, and ised only for charitable purposes and not for the ber onferring impermissible private benefit		•		☐ Yes	┌ No
art	II Conservation Easements. Complete	ıf the organization answered "Yes"	' to Forn	n 990, Part IV	', line 7.	
Γ Γ (Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	on or pleasure) Preservation of Preservation of	a certifie	d historic struc		a
e	asement on the last day of the tax year			T		
_			<u> </u>	Held at the	End of the	Year
•	otal number of conservation easements		2a			
	otal acreage restricted by conservation easements		2b			
: 1	lumber of conservation easements on a certified his	storic structure included in (a)	2c			
1 1	lumber of conservation easements included in (c) a	cquired after 8/17/06	2d			
	lumber of conservation easements modified, transfender the taxable year 🗠	erred, released, extinguished, or termina	ated by th	ie organization	during	
ľ	lumber of states where property subject to conserv	ation easement is located ►				
	oes the organization have a written policy regarding inforcement of the conservation easements it holds		andling of	violations, and	☐ Yes	┌ No
9	staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ements d	uring the year 🕨	+	
	mount of expenses incurred in monitoring, inspecti	-		= ;		
	• \$	ng, and emerening conservation caseme.		g cc , c.a.		
[Poes each conservation easement reported on line 2 .70(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2 (d) above satisfy the requirements of s	ection		☐ Yes	┌ No
I	n Part XIV, describe how the organization reports collaboration alance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financ	•	•		·
	Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures	s, or Ot	her Similar <i>i</i>	Assets.	
- a	f the organization elected, as permitted under SFAS irt, historical treasures, or other similar assets held irovide, in Part XIV, the text of the footnote to its fir	116, not to report in its revenue stater for public exhibition, education or resea	arch ın fu			е,
ŀ	f the organization elected, as permitted under SFAS iistorical treasures, or other similar assets held for vrovide the following amounts relating to these items	public exhibition, education, or research			•	
(i) Revenues included in Form 990, Part VIII, line 1			► \$		C
(ii) Assets included in Form 990, Part X			► \$		
Ι	f the organization received or held works of art, hist ollowing amounts required to be reported under SFA		for finan	. —		· · · · · · · · · · · · · · · · · · ·
		o 110 relating to these items		L . A		0
a _F	Revenues included in Form 990, Part VIII, line 1			▶ \$		

b Assets included in Form 990, Part X

Pari	311 Organizations Maintaining Co	llections of Art	:, His	torica	I Treas	ures, or C)the	r Similar Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e follow	ing that a	re a signific	ant u	se of its collectio	n	
а	Public exhibition		d	┌ Lo	an or ex	change prog	rams			
ь	Scholarly research		e	Го	ther					
С	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and expla	ın how	v they fu	rther the	organızatıor	ı's e>	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			•					Yes	√ No
Par	t IV Escrow and Custodial Arrang					n answere	d "Y	es" to Form 990),	
	Part IV, line 9, or reported an an		•	•						
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other ass	sets		Yes	☐ No
Ь	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng table	9	Г				
_	B					-	4	A mou	ınt	
C C	Beginning balance					-	1c			
d	Additions during the year					-	1d			
e	Distributions during the year					-	1e			
f	Ending balance					L	1f			
2a	Did the organization include an amount on Fo		e 21?					ı	Yes	No
	If "Yes," explain the arrangement in Part XIV				"\\oo" to	Farm 000	Day	+ TV Inc. 10		
Ра	rt V Endowment Funds. Complete	(a)Current Year		Werea Prior Year		FORM 990 Two Years Back		TIV, IINE IU.)Three Years Back (e) Four Y	ears Back
1a	Beginning of year balance	87,784,498	(-)	74,567		36,322,9	-	32,233,832	- /	
b	Contributions	945,322		3,155	5,714	37,656,99	93	12,075,232		
c	Investment earnings or losses	-37,649		13,070),135	4,326,43	34	-6,558,086		
d	Grants or scholarships							0		
e	Other expenditures for facilities	3,317,641		3,008	3,451	3,700,00	03	1,428,027		
	and programs					20.25	7.5			
f	Administrative expenses	85,374,530		07 704	1.400	74,567,10	_	0 20 222 051		
g	End of year balance	, ,		87,784	1,498	74,367,10	³⁰	36,322,951		
2	Provide the estimated percentage of the yea		as							
а	Board designated or quasi-endowment 🕨	0 %								
b	Permanent endowment 🕨 91 600 %									
c	Term endowment ► 8400 %									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon t	hat are	held and	administere	d for	the	Yes	No
	(i) unrelated organizations							3a(i)	103	No
	(ii) related organizations							3a(ii)		Νο
b	If "Yes" to 3a(II), are the related organizatio	ns listed as require	d on S	chedule	R? .			3b		
4	Describe in Part XIV the intended uses of th	e organization's en	dowme	ent funds	3					
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	rt X, lır	ne 10.	П				
	Description of property				t or other vestment)	(b) Cost or of basis (othe		(c) Accumulated depreciation	(d) Boo	ok value
1a	Land					314	1,400			314,400
b	Buildings					156,339	9,829	7,853,622	148	8,486,207
c	Leasehold improvements									
d	Equipment					31,414	1,500	4,709,824	20	5,704,676
е	Other									

175,505,283

Part VIII Investments—Other Securities. See	orm 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(B)Book value	Cost or end-o	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)0 ther			
(A) INVESTMENT-LIMITED PARTNERSHIP	21,173,422		F
(A) INVESTMENT EIMITED LAKTNERSHIT	21,173,422		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	21,173,422		
Part VIII Investments—Program Related. See			
Parte VIII Investments—Program Related. See	T		J . 6 l
(a) Description of investment type	(b) Book value		d of valuation
		Cost or end-o	-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin			
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, In	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) Should equal Form 990, Part X, col.(B) line 15	e 15. tion 5)		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Description (b) Should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	e 15. tion 5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) Should equal Form 990, Part X, col.(B) line 15	e 15. tion 5)		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Description (b) Should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	e 15. tion 5.) , line 25. (b) A mount		(b) Book value

Sched	dule D (Form 990) 2011		Page 4
Par	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,481,767
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	18,865,405
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,383,638
4	Net unrealized gains (losses) on investments	4	-683,102
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-25
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-683,127
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-5,066,765
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	15,865,836
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,677,131
3	Subtract line 2e from line 1	3	14,188,705
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b 293,062		
c	Add lines 4a and 4b	4c	293,062
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	14,481,767
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	20,932,576
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	2,360,233
3	Subtract line 2e from line 1	3	18,572,343
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 293,062		
c	Add lines 4a and 4b	4c	293,062
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	18,865,405

Part XIV Supplemental Information

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

Ident if ier	Return Reference	Explanation
ENDOWMENT FUNDS	SCHEDULE D, PART V, LINE 4	DURING 1991, NWS ESTABLISHED THE NEW WORLD SYMPHONY ENDOWMENT FUND THE PURPOSE OF THE ENDOWMENT FUND IS TO CREATE A CONTINUOUS DEVELOPMENT PROGRAM THAT WILL ENABLE INDIVIDUALS, CORPORATIONS, AND FOUNDATIONS TO MAKE GIFTS TO NWS, TO PROVIDE FOR THE PERMANENT FINANCING OF THE PROGRAMS OF NWS, AND TO ENSURE THE PERMANENT EXISTENCE OF NWS
ARTWORK COLLECTION	SCHEDULE D, PART III, LINE 4	New World Symphony believes the classical music experience begins when one crosses our NEW CAMPUS' threshold as a patron, musician or curious observer. Our NEW CAMPUS and its contents ARE the beginning of the experience as well as the contents inside. The art piece that has been so generously donated to us aids in the beginning of this experience.
REVENUE/EXPENSE RECONCILIATION	SCHEDULE D, PART XII LINE 2D & PART XIII LINE 2D	Direct Rental expenses of \$1,825,497 are shown as expenses on the financial statements. However, Direct rental expenses are shown net of rental income on the Form 990 page 9. Direct Fundraising expenses of \$317,434 are shown as expenses on the financial statements. However, Direct Fundraising expenses are shown net of fundraising income on the Form 990 page 9. Total Adjustment - \$2,142,931
REVENUE/EXPENSE RECONCILIATION	SCHEDULE D, PART XII LINE 4B & PART XIII LINE 4B	Management Fees of \$293,062 are shown net of investment income on the financial statements. However, management fees are shown as a separate expense on the Form 990 page 10
UNCERTAIN TAX POSITION	SCHEDULE D, PART X, LINE 2	New World Symphony is a non-profit corporation as defined by Section 501(c)(3) of the U S Internal Revenue Code and as such is subject to federal income taxes only on unrelated business income. There were no income taxes resulting from unrelated business income during the year ended June 30, 2012. New Campus and Alton Pointe are single member limited liability companies and accordingly are disregarded for tax purposes. Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by taxing authorities. Management has analyzed the tax positions taken and has concluded that as of June 30, 2012, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. If the Organization were to incur an income tax liability in the future, interest would be reported as interest expense and penalties would be reported as income taxes. The Organization is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. Management believes the Organization is no longer subject to income tax examinations for years prior to 2009.

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As Filed Data -

DLN: 93493130016253

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

Schools

Name of the organization NEW WORLD SYMPHONY INC C/O DAVID PHILLIPS

Employer identification number

59-2809056

Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	- 4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	4d	Yes	
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		Νο
	Scholarships or other financial assistance? Educational policies?	5d		No
	Use of facilities?	5e 5f		N o
g	Athletic programs?	5g		No
H	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		Νο
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b	Yes	N o
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	No_
		•		

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
NONDISCRIMINATORY POLICY	SCHEDULE E, LINE 3	THE ORGANIZATION'S NONDISCRIMINATORY POLICY IS STATED IN ITS RECRUITMENT BROCHURE AS WELL AS THE PUBLICATIONS "INTERNATIONAL MUSICIAN" WHICH IS WELL KNOWN WITHIN THE COMMUNITY IT SERVES
FINANCIAL AID	SCHEDULE E, LINE 6A	THE ORGANIZATION RECIEVES GRANTS FROM VARIOUS GOVERNMENTAL AGENCIES TO FACILITATE PROGRAMS IN FURTHERANCE OF ITS MISSION

Schedule E (Form 990 or 990-EZ) 2011

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SCHEDULE G

Department of the Treasury

licensing

Internal Revenue Service

(Form 990 or 990-EZ)

As Filed Data -

DLN: 93493130016253

Supplem

Supplemental Information Regarding Fundraising or Gaming Activities

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.

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

OMB No 1545-0047

2011

Open to Public Inspection

	V WORLD SYMPHONY INC						Employer Iden	tirication number
C/0	DAVID PHILLIPS						59-2809056	
Pa	rtI Fundraising Act	t ivities. Complet	e if the c	rganızat	cion answered "Yes" t	to Form	990, Part IV	, line 17.
a b c d	Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have a	licitations : a written or oral agre	eement wil	e f g :h any ınd	Solicitation of non Solicitation of gov Special fundraisin	n-governi vernment ng events rs, direct	ment grants grants cors, trustees	Г Yes Г N
b	If "Yes," list the ten highes to be compensated at leas							
((i) Name and address of individual or entity (fundraiser)	fundrais custo conti		undraiser have from activity		(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
Tota				<u> </u>				
100								

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form						
			(a) Event #1 GALA (event type)	(b) Event #2 FAMILY EVENT (event type)	(c) O ther Events 1 (total number)	(d) Total Events (Add col (a) through col (c))		
₽	1	Gross receipts	779,869	94,853	5,885	880,607		
Revenue	2	Less Charitable contributions	617,927	77,803	5,885	701,615		
	3	Gross income (line 1 minus line 2)	161,942	17,050		178,992		
	4	Cash prizes						
မွာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs	77,455			77,455		
	7	Food and beverages	75,071	728		75,799		
<u>Direct</u>	8	Entertainment	25,307	4,156		29,463		
Δ	9	Other direct expenses .	127,075	7,642		134,717		
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	🕨	(317,434)		
	11 Net income summary Combine lines 3 and 10 in column (d)							
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))		
	1	Gross revenue						
မှာ	2	Cash prizes						
pens	3	Non-cash prizes						
	4	Rent/facility costs						
Direct Expenses Rev	5	Other direct expenses						
	6	Volunteer labor	┌ Yes ┌ No	┌ Yes ┌ No	┌ Yes ┌ No			
	7	Direct expense summary Add lines	s 2 through 5 in column (d)		()		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)				
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in eac	h of these states?		· Fyes Fno		
10a b		re any of the organization's gaming l Yes," Explain			the tax year?	· · Fyes Fno		

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

DLN: 93493130016253 OMB No 1545-0047

Employer identification number

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

Inspection

C/O DAVID PHILLIPS Part I General Information	n on Grants and	d Assistance				59-2809056	
 Does the organization maintain r the selection criteria used to awa Describe in Part IV the organization 	ecords to substant ard the grants or as	ate the amount of the sistance?					✓ Yes
Part II Grants and Other As Form 990, Part IV, line Part IV and Schedule I	ssistance to Go 21 for any recip	vernments and O	rganizations in the nore than \$5,000. Ch	United States. Con eck this box if no one	recipient receive	ed more than \$5,000	. Use
(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
2 Enter total number of section 503 Enter total number of other organ		_				_	

Schedule I	(Form 990) 2011	
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
(1) STIPEND FOR PROGRAM PARTICIPANTS	88	1,393,687			
(2) STIPEND (SUBSTITUTES) PROGRAM ACTIVITIES	202	62,932			

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

Ident if ier	Return Reference	Explanation
MONITORING THE USE	SCHEDULE I, PART I, LINE 2	ALL OF THE ORGANIZATION'S FELLOWS RECEIVE A STIPEND FOR LIVING EXPENDITURES WHILE IN THE
OF GRANTS IN THE U S		PRO GRAM

Schedule I (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493130016253

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**

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

NEV	W WORLD SYMPHONY INC	• •			
C/0	O DAVID PHILLIPS 5	9-2809056			
Pa	art I Questions Regarding Compensation				
			Y	'es	Νo
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person lis	ted in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding				
	First-class or charter travel Housing allowance or residence for pe	ersonal use			
	Travel for companions Payments for business use of person				
	Tax idemnification and gross-up payments Health or social club dues or initiation	n fees			
	Discretionary spending account Personal services (e.g., maid, chauffe	ur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding pay reimbursement orprovision of all the expenses described above? If "No," complete Part III to exp		b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by a officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line				
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract				
	✓ Independent compensation consultant ✓ Compensation survey or study				
	Form 990 of other organizations Approval by the board or compensations	on committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the or a related organization	: filing organization			
а	Receive a severance payment or change-of-control payment?	4a	a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	41	b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	40	С		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in	Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of	,			
а	The organization?	5a	a		Νo
b	Any related organization?	5t	ь		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 the organization pay or accrue any compensation contingent on the net earnings of	,			
а	The organization?	6a	a		Νo
b	Any related organization?	61	b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			T	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-payments not described in lines 5 and 6? If "Yes," describe in Part III	fixed 7			Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," de in Part III	scribe			N -
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described	In Regulations			No

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

	., . ,		•	,			. ,	
(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) HOWARD HERRING	(1) (11)	247,745 0	0 0	0 0	0 0	9,641 0	257,386 0	0
(2) VICTORIA ROGERS	(1) (11)	249,657 0	0 0	0 0	0	l '	259,386 0	0
(3) DAVID PHILLIPS	(1) (11)	210,328 0	0 0	0	0	,	218,483 0	0 0
(4) DOUGLAS MERILATT	(1) (11)	187,404 0	0	0	0	7,253 0	194,657 0	0
(5) WILLIAM WILLIAMS	(1) (11)	150,220 0	0	0	0	l '	156,198 0	0

Schedule J (Form 990) 2011 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

	Identifier	Return Reference	Explanation
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Schedule J (Form 990) 2011

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DLN: 93493130016253

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.

2011

Open to Public Inspection

Name of the organization NEW WORLD SYMPHONY INC C/O DAVID PHILLIPS Employer identification number

59-2809056

ldentifier	Return Reference	Explanation
GOVERNING BODY AND MANAGEMENT	FORM 990, PAGE 6, PART VI, SECTION A, LINE 2	SARAH S ARISON - NEICE OF MADELINE ARISON & HARRY M HERSH HARRY M HERSH & MADELINE ARISON - UNCLE & AUNT OF SARAH S ARISON JUDY WEISER - SPOUSE OF SHERWOOD M WEISER (RECENTLY DECEASED) - SPOUSE OF JUDY WEISER
POLICIES AND PROCEDURES	FORM 990, PAGE 6, PART VI, SECTION B, LINE 12C	EMPLOYEES AND BOARD MEMBERS OF NWS HAVE AN OBLIGATION TO CONDUCT BUSINESS WITHIN GUIDELINES THAT MINIMIZE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST AS MUCH AS POSSIBLE THE POLICY ESTABLISHES THE FRAMEWORK WITHIN WHICH NWS WISHES ITS BUSINESS TO OPERATE THE PURPOSE OF THESE GUIDELINES IS TO PROVIDE GENERAL DIRECTION SO THAT EMPLOYEES AND BOARD MEMBERS CAN SEEK FURTHER CLARIFICATION ON ISSUES RELATED TO THE SUBJECT OF ACCEPTABLE STANDARDS OF OPERATION STAFF MEMBERS AT DIRECTOR LEVEL AND ABOVE AND TRUSTEES ARE ASKED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ON AN ANNUAL BASIS, WHICH INDICATES WHETHER OR NOT THEY HAVE PARTICIPATED IN ANY BUSINESS TRANSACTION THAT WOULD GIVE RISE TO A CONFLICT OF INTEREST
POLICIES AND PROCEDURES	FORM 990, PAGE 6, PART VI, SECTION B, LINE 15A	THE CHAIRMAN OF THE BOARD REVIEWS COMPARABILITY DATA WHEN HIRING A NEW PRESIDENT AND ANNUALY APPROVES THE PRESIDENT'S COMPENSATION PACKAGE BASED ON PERFORMANCE THE PRESIDENT APPROVES BOTH THE EXECUTIVE VICE PRESIDENT AND SENIOR VICE PRESIDENT'S COMPENSATION PACKAGE BASED ON PERFORMANCE
DISCLOSURE ITEMS	FORM 990, PAGE 6, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST THE ANNUAL REPORT CONTAINS A BRIEF SUMMARY OF THE FINANCIAL STATEMENTS AND THE COMPLETE FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST THE FORM 990 IS ALSO AVAILABLE THROUGH ACCESS OF GUIDESTAR
GOVERNING BODY AND MANAGEMENT	PAGE 6, PART	THE CFO IS REPONSIBLE FOR THE TIMELY PREPARATION OF THE FORM 990 IT WILL THEN BE PRESENTED TO THE FINANCE COMMITTEE SUFFICIENTLY IN ADVANCE OF THE FILING DEADLING FOR THEIR REVIEW ALL MEMBERS OF THE BOARD OF TRUSTEES WILL BE INVITED TO REVIEW THE FINAL FORM 990 UPON REQUEST
RECONCILIATION OF NET ASSETS	FORM 990, PART XI, LINE 5	OTHER CHANGES IN NET ASSETS RELATES TO UNREALIZED GAINS AND LOSSES NOT RECORDED ON THE FORM 990 TOTAL UNREALIZED GAIN/LOSS PER THE FINANCIAL STATEMENTS - (\$683,102)

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DLN: 93493130016253

SCHEDULE R (Form 990)

Name of the organization NEW WORLD SYMPHONY INC C/O DAVID PHILLIPS

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

Employer identification number

59-2809056

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I Identification of Disregarded Entities (Comp	lete ıf the organızatı	on answered "Yes	s" on Form 990	, Part IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controllin entity	ng		
(1) NEW CAMPUS II LLC 500 17TH STREET MIAMI BEACH, FL 33139 43-2074025	DVLP NEWFACLT	FL	-4,677,237	153,515,673	NONE			
(2) ALTON POINTE LLC 500 17TH STREET MIAMI BEACH, FL 33139 45-5001665	HOUSING	FL	248,969	20,902,788	NONE			
Part II Identification of Related Tax-Exempt Organior more related tax-exempt organizations during		if the organizatio	n answered "Y	es" on Form 990,	Part IV, line 34 b	ecause it had	d one	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	(e) Public charity sta (if section 501(c))		Section Iling con	(g) Section 512(b)(13 controlled organization	
						Yes	No	
For Privacy Act and Paperwork Reduction Act Notice, see the Instructi	ons for Form 990.	Cat No 5	50135Y		Schedu	ile R (Form 990	2011	

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana part	ral or iging	(k) Percentage ownership
							Yes	No		Yes No		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership
		<u> </u>					

Schedule	e R (Form 990) 2011		Рa	ge 3
Part \	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
No	te. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Durın	ig the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Re	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		
b Gr	ft, grant, or capital contribution to related organization(s)	1 b		
c Gif	ft, grant, or capital contribution from related organization(s)	1c		
d Lo	pans or loan guarantees to or for related organization(s)	1d		
e Lo	pans or loan guarantees by related organization(s)	1e		
f Sa	ile of assets to related organization(s)	1f		
g Pu	urchase of assets from related organization(s)	1g		
h Ex	change of assets with related organization(s)	1h		
i Lea	ase of facilities, equipment, or other assets to related organization(s)	1i		
j Lea	ase of facilities, equipment, or other assets from related organization(s)	1j		
k Pe	erformance of services or membership or fundraising solicitations for related organization(s)	1k		
l Per	rformance of services or membership or fundraising solicitations by related organization(s)	11		
m Sh	naring of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		
n Sh	naring of paid employees with related organization(s)	1n		
o Re	embursement paid to related organization(s) for expenses	10		
p Re	eimbursement paid by related organization(s) for expenses	1 p		
-				
q Ot	ther transfer of cash or property to related organization(s)	1q		
r Ot	her transfer of cash or property from related organization(s)	1r		
	the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) (b) (c) Method of det	(d)	ing am	ount

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	5	(e) Are all partners section 601(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloca	ations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part		(k) Percentage ownership
			311)	Yes	No			Yes	No		Yes	No	
				<u> </u>									

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Ident if ier	Return Reference	Explanation	

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 59-2809056

Name: NEW WORLD SYMPHONY INC

C/O DAVID PHILLIPS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and In (A)	(B)			C (C)	1 3			(D)	(E)	/E)
Name and Title	Average hours per		that	(che				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
NEISEN KASDIN CHAIRMAN	5 0	Х		х						
ROSE ELLEN GREENE VICE CHAIRMAN	1 0	х		х						
MARIO DE ARMAS TRUSTEE/TREASURER/FIN COMM	1 0	х		х						
ROBERT MOSS SECRETARY	1 0	х		х						
SARI AGATSTON TRUSTEE	1 0	х								
SHELDON T ANDERSON TRUSTEE	1 0	х								
MADELEINE ARISON TRUSTEE	1 0	х								
SARAH S ARISON TRUSTEE	1 0	Х								
HILARIE BASS TRUSTEE	1 0	Х								
MATTHEW W BUTTRICK TRUSTEE	1 0	Х								
ADAM CARLIN CHAIR OF DEVELOPMENT COMMITTEE	2 0	Х								
BRUCE E CLINTON TRUSTEE	1 0	Х								
BRUCE JAY COLAN EX-OFFICIO	1 0	Х								
CASEY CUMMINGS TRUSTEE	1 0	Х								
PETER J DOLARA TRUSTEE	1 0	Х								
SUSAN S DUBIN TRUSTEE	1 0	Х								
HOWARD FRANK TRUSTEE, CHAIR OF CAP CAMP	1 0	Х								
JOHN J GERAGHTY TRUSTEE	1 0	Х								
C THOMAS GREENE TRUSTEE	1 0	Х								
BRUCE W GREER TRUSTEE	1 0	х								
HARRY M HERSH TRUSTEE	1 0	х								
RICHARD M JACOBS TRUSTEE	1 0	х								
GERALD KATCHER TRUSTEE	1 0	х								
R KIRK LANDON TRUSTEE	1 0	х								
ENRIQUE LERNER RAIS TRUSTEE	1 0	х								

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours		(ition that a		/)			(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
HELENE LINDENFELD TRUSTEE	1 0	Х										
ALAN LIEBERMAN TRUSTEE	1 0	Х										
ALBERT R MOLINA JR TRUSTEE	1 0	Х										
WILLIAM L MORRISON TRUSTEE	1 0	Х										
SANDRA R MUSS TRUSTEE	1 0	Х										
PATRICIA M PAPPER TRUSTEE	1 0	Х										
JEFFREY T ROBERTS CHAIR OF INVESTMENT COMMITTEE	1 0	Х										
PETER ROBBINS TRUSTEE	1 0	Х										
RICHARD T SANZ TRUSTEE	1 0	Х										
DIANE S SEPLER TRUSTEE	1 0	X										
EDWARD MANNO SHUMSKY TRUSTEE	1 0	X										
RICHARD SKOR TRUSTEE	1 0	Х										
PAUL H STEBBINS TRUSTEE	1 0	Х										
JUDY WEISER TRUSTEE	1 0	Х										
SHERWOOD M WEISERDeceased 082011 TRUSTEE	1 0	Х										
JO DY WO LFE TRUSTEE	1 0	Х										
RICHARD J WURTMAN TRUSTEE	1 0	Х										
HOWARD HERRING PRESIDENT/CEO	60 0				х			247,745	0	9,641		
VICTORIA ROGERS EXECUTIVE VICE PRESIDENT	60 0				х			249,657	0	9,729		
DAVID PHILLIPS SR VP & CFO	60 0				x			210,328	0	8,155		
DOUGLAS MERILATT SR VP & ARTISTIC PLANNING/PROG	60 0				x			187,404	0	7,253		
WILLIAM WILLIAMS SR VP/DEAN OF MUSICIANS	60 0				x			150,220	0	5,978		
JEAN PIERRE DODEL VP OF TECHNOLOGY	60 0					х		136,249				
FAYE MUNNINGS VP & ASSISTANT CFO	60 0					Х		114,731		4,330		
PAUL WOEHRLE SR DIRECTOR OF DEVELOPMENT	60 0					х		115,085		4,344		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	Average Position (check all						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	Reportable	compensation from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
CRAIG HALL VP OF COMMUNICATIONS	60 0					х		117,239		4,431