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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

▶ Do not enter Social Security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u>	For th	e 2013 calendar year, or tax year beginning JUL 1, 2013 and	ل enaing	UN 30, 2014	
В	Check if applicab	C Name of organization		D Employer identific	cation number
	Addre	Springfield Symphony Foundation			
	Name			31-6	077554
	Initial	No. 1 Acres 10 Acres	Room/suite	E Telephone number	
	Termi	·			325-8100
	Amen	ded O		G Gross receipts \$	325037.
	Application			H(a) Is this a group re	
	pend	F Name and address of principal officer: Peter Gus Geil		for subordinates	
		same as C above		H(b) Are all subordinates in	cluded? Yes No
<u> </u>	Tax-ex	empt status. X 501(c)(3)	or 527	If "No," attach a	list (see instructions)
J	Websi	te: ▶ None		H(c) Group exemption	n number 🕨
K	Form o	forganization: X Corporation Trust Association Other	L Year	of formation: 1966 N	State of legal domicile: OH
	art I	Summary		<del></del>	
-0	1	Briefly describe the organization's mission or most significant activities. The	primar	y purpose o	f this
Activities & Governance		organization is to raise and manage money			
rna	2	Check this box   If the organization discontinued its operations or dispose		·	
o e	3	Number of voting members of the governing body (Part VI, line 1a)		3	11
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11
Se	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
Š	6	Total number of volunteers (estimate if necessary)		. 6	0
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
⋖		Net unrelated business taxable income from Form 990-T, line 34	, ,	7b	0.
				Prior Year	Current Year
ev.	8	Contributions and grants (Part VIII, line 1h)		103163.	109298.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		136000.	147312.
Œ	11	Other revenue (Part VIII, column (A), lines-5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11/2 (must equal Part VIII, column (A), line 12)		239163.	256610.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		112584.	128037.
	14	Benefits paid to or for members (Part IX, column (A) (in 4)		0.	0.
Ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ď	Ь	Total fundraising expenses (Part IX, column (D), line 25)	0.		
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		23069.	22187.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		135653.	150224.
	19	Revenue less expenses Subtract line 18 from line 12		103510.	106386.
PS C			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		3113505.	3394442.
ASS	21	Total liabilities (Part X, line 26)		0.	0.
Net Assets or   Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		3113505.	3394442.
P	art II	Signature Block			
Und	ler pena	alties of perjury, I declare that I have examined this return, including accompanying schedule:	s and statem	ents, and to the best of my	knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.	
				1	2/8/2014
Sig	n	Signature of officer		Date	-(
He	re	Peter Gus Geil, President Precident	I		
<u>5</u>		Type or print name and title			
`		Print/Type preparer's name Preparer's signature	- 1	ate Check	PTIN
Pai	d	Keith O. Applegate (Ro) Affail (		12 - 4/- U if self-employe	P00503759
	parer	Firm's name Taylor, Applegate, Hughes & Association	c. Ltd	Firm's EIN	31-0918847
	Only	Firm's address 629 E High St			
ز		Springfield, OH 45505		Phone no. (9	37)325-1538
Ма	y the I	RS discuss this return with the preparer shown above? (see instructions)		• • •	X Yes No
	001 10-2		ons.	p/1	\ Form <b>990</b> (2013)

	1990 (2013) Springfield Symphony Foundation	31-6077554	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
	The Springfield Symphony Foundation was established to	raise and	
	manage money for the support of the Springfield Symphon		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	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?	Yes	X No
•	If "Yes," describe these changes on Schedule O.		110
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	• •	
	revenue, if any, for each program service reported.	515, the total expenses, a	ariu
4a	40000	1/7	314.)
44	Gave grants to Springfield Symphony Orchestra to furthe	m their	<u> </u>
	Non Profit objectives of providing symphonic music to the	he communited	
	Non-Profit objectives of providing symphonic music to t		
	providing music education and programs for the youth of	the greater	
	Springfield community.	<del> </del>	
		<del></del>	
4b	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	)
		<del></del>	
		<del></del>	
		· · · · · · · · · · · · · · · · · · ·	
		<del></del>	
4c	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	)
			·
			<del> </del>
		·- ·	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	١	
4e	Total program service expenses ► 128037.		
		Eorm Q	90 (2013)
33200 10-29		Folili 9	(2013)

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		^
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_0_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
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, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		•
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the officed states?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		<del>-^</del> -
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	175		-23
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
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		x
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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Pa	rt IV Checklist of Required Schedules (continued)		r:	r
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		ا ۔۔	
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,	j		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	<u> </u>	X
<b>24</b> a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	l		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If *No", go to line 25a	. 24a	<u></u>	X
ŧ	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		
c	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		X
t	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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
ē	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an office	r,		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	. 30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
٠.	If "Yes," complete Schedule N, Part I	31	1	Х
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		x
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		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			- <del></del>
34	Part V, line 1	34	x	
25.	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<del></del>	х
	of If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	- <del></del>	<u> </u>	
•	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	
20	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization	-		<u> </u>
36	If "Yes," complete Schedule R, Part V, line 2	36		x
97		30_	<del> </del>	<del>  ^</del>
37	DIG THE ORGANIZATION CONQUESTINOS THAN 570 OF ItS ACTIVITIES THOUGH AN ENTRY THAT IS NOT A FEIGURG ORGANIZATION	- 1	1	1

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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note, All Form 990 filers are required to complete Schedule O

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		:	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
-	(gambling) winnings to prize winners?	1c	.	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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 as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds 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		
	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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section F04(a)(40) conscientions Fotor:			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from embers or shareholders  Creas income from other sources (Do not not amounts due or paid to other sources against			!
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
40-	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	.56		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
Ü	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a		14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	The state of the s		990	(2013)

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

	Check if Schedule O contains a response or note to any line in this Part VI			$\bar{\mathbf{x}}$
Sec	tion 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 11			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 11			
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		X
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		X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		<u>X</u>
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		İ	
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>x</u>
b	Other officers or key employees of the organization	15b		<u>X</u> _
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
тба	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	<u>16a</u>		<u>X</u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
202	exempt status with respect to such arrangements?tion C. Disclosure	16b		
17 10	List the states with which a copy of this Form 990 is required to be filed OH  Section 5104 requires an expenient to make its Forms 1902 (or 1904 if any leading) 900, and 900 T (Section 5104 ) 900.			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at fact public inspection. Indicate how you made these available. Check all that explicit	vallab	0	
	for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  X Upon request  Other (explain in Schedule O)			
10	opening (or print)	J &:	!	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	ınan	cial	
20	statements available to the public during the tax year.	!aa: ►		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizat Hal Goodrich - 937-325-8100	ion: 📂	·	
	300 South Limestone Street, Springfield, OH 45506			<del></del>
	200 DOGGH HIMEBCOME BUTEEC, BUTTHAITEIN, OU 43300		202	

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(do	not c	(C Pos heck ss pe	C) Ition more rson		one h an	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	il trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Peter Gus Geil	2.00	<u> </u>								
President	2 00	X	_	X			<u> </u>	0.	0.	0.
(2) Maureen Osseck	2.00			<b>3</b> 2		ĺ	İ		•	
Vice President	2.00	X	<del>                                     </del>	X	_		-	0.	0.	0.
(3) Hugh Barnett	2.00	x		x				0.	0.	0.
Secretary	2.00	^	_	•			-	0.		0.
(4) Hal Goodrich	2.00	X		х				0.	0.	0.
Treasurer (5) Herb Greer	1.00	-		43		-		•	0.	
Trustee	2.00	x			ŀ	1		0.	0.	0.
(6) Jim Gianakopoulos	1.00								<u></u>	
Trustee		X			ŀ			0.	0.	0.
(7) William Hicks	1.00									•
Trustee		X						0.	0.	0.
(8) Dan McGregor	1.00				}	1				
Trustee		X			<u> </u>	<u> </u>		0.	0.	0.
(9) Mark Robertson	1.00	ļ			ĺ				_	
Trustee	4 00	X			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(10) Margaret Roark	1.00	٠,							•	•
Trustee	1 00	X			-	<del> </del>		0.	0.	0.
(11) Doug Deer	1.00	X						0.	0.	•
Trustee (12) Paris Point in	1.00	┝	-	├		╁	$\vdash$	U •	0.	0.
(12) David Deitrick	1.00	┨						0.	0.	0.
Trustee		+-	_		┢	╁╴	$\vdash$	<u> </u>		
	,	1			ŀ					
	<del>-</del> ·   · · · · · · · · · · · · · · · · ·	<del> </del>								
		1	1							
		$oxed{oxed}$			_	<u>L</u>				
				L		_				
		<u> </u>		L_	<u> </u>	<u>L_</u>				

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Pan	(A)  Name and title	(B) Average hours per week (list any hours for related organizations below	tee or director	not c	tion more rson i		one n an (ee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC		Estima amour othe compen from organiza and ref		of Ion Ion Ion	
		line)	<u>=</u>	SE .	Officer	Key	돌	Ē						<del></del>
			_								_			
					-									
						_								
_			_								_	-		
			_								$\perp$			
	Sub-total	/II Section A						>	0.		0.			0.
	Total (add lines 1b and 1c)			•	•	•		<u> </u>	0.		0.			0.
2	Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	ed al	bove	e) wh	o r	eceived more than \$100	,000 of reportable	,			0
				_ 1							Г		Yes	No
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			е, ке	y er	npic	yee	or	nignest compensated e	прюуее оп	ļ	3		<u>x</u>
4	For any individual listed on line 1a, is the sand related organizations greater than \$15									the organization		4		х
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion 1	rom	any	/ unr			dual for services	Ī			
Sec	rendered to the organization? If "Yes," cortion B. Independent Contractors	nplete Schedul	e J i	or s	uch_	pers	son					5		<u> </u>
1	Complete this table for your five highest countries the organization. Report compensation for										oensa	ition fr	om	
	(A) Name and busines					• • • • • • • • • • • • • • • • • • • •	<u> </u>		(B) Description of s			(C		
	Ivanie and busines	3 2001033	N	ON]	<u> </u>				<u> </u>	ioi vices		Jinpon		<u>.                                    </u>
				_										
												<u> </u>		
										,				
2	Total number of independent contractors		not li	imite	d to		_	stec	d above) who received n	nore than	-			
	\$100,000 of compensation from the organ	nization					0		<del></del>			Form §	990 (2	2013)

		Check if Schedule O cont	ains a response	or note to any line		<u>_</u>	·	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns	1a					
ira on	b		1b					
ا څي	c	F	1c					
# je		Related organizations	1d					
S, E	e	0	ions) 1e					
ig is	f	All other contributions, gifts, gran						
		similar amounts not included abo		109298.				
열	g		-	_				
Contributions, Gifts, Grants and Other Similar Amounts	<u>h</u>	Total. Add lines 1a-1f		<b></b>	109298.			
				Business Code				
8	2 a							
او چَ	b							
Program Service Revenue	С							
le a	d						<del></del>	<b>_</b>
<u> </u>	е							
ا ت	f	All other program service reve	nue					
$\longrightarrow$	g	Total. Add lines 2a-2f						
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<b>&gt;</b>	78244.	78244.		<del> </del>
	4	Income from investment of ta	x-exempt bond p	roceeds -				<del></del>
	5	Royalties		<b>•</b>				
			(i) Real	(ii) Personal				
	6 a		-					
]		Less: rental expenses						
1		Rental income or (loss)		L				
		Net rental income or (loss)		10.50				<del> </del>
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	137495.					
	Ь	Less: cost or other basis	60407					
		and sales expenses	68427.	<del></del>				
		Gain or (loss)	69068.		60060	60060		
		Net gain or (loss)			69068.	69068.		<del></del>
Jue .	8 a	Gross income from fundraisin	g events (not					
Ę		including \$	01					
Be		contributions reported on line						
Other Rever		Part IV, line 18	а					
ᅙ		Less: direct expenses	b					
		Net income or (loss) from fund Gross income from gaming ad	=					+
	9 а	5 1044 40						
ļ		Less direct expenses	a b					
		Net income or (loss) from garr	-					
		Gross sales of inventory, less	-					
	10 4	and allowances	a .					
	h		•					
		Less. cost of goods sold  Net income or (loss) from sales of inventory						
ŀ		Miscellaneous Revenu		Business Code			<u>-</u>	<del>                                     </del>
Ì	11 a			23311033 0006				
	b							<del> </del>
	c							1
	d	All other revenue						
	e	Total. Add lines 11a-11d					<del></del>	
	12	Total revenue. See instructions.			256610.	147312.	0	. 0.
33200								Form <b>990</b> (2013)

Part IX | Statement of Functional Expenses

Secu	Check if Schedule O contains a response			implete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		·		
	organizations in the United States. See Part IV, line 21	128037.	128037.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees .				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages				
8	Pension plan accruals and contributions (include		j		
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	-			·
11	Fees for services (non-employees)				
a	Management				
b	Legal				
С.	Accounting				<del>-</del>
d	Lobbying				<del></del>
e	Professional fundraising services. See Part IV, line 17	21987.		21987.	
f	Other. (If line 11g amount exceeds 10% of line 25,	21307.		21307.	<del> </del>
g	column (A) amount, list line 11g expenses on Sch O.)				
10	Advertising and promotion				
12 13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		1		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates _				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	State Registration Fees	200.	- '	200.	
b					
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	150224.	128037.	22187.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				- 000

Springfield Symphony Foundation 31-6077554 Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 1 Cash - non-interest-bearing 1 14535. 18079. Savings and temporary cash investments 2 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 . . . . . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 3098970. 3376362. 11 Investments - publicly traded securities 11 12 Investments - other securities, See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 3113505 3394442 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 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 D 0. Total liabilities. Add lines 17 through 25 0. 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1292233. 1482866. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 28 1911576. 1821272 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30

> 3394442. Form **990** (2013)

3394442.

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32

311350<u>5</u>.

3113505

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32

33

Paid-in or capital surplus, or land, building, or equipment fund

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

	990 (2013) Springfield Symphony Foundation	31-607	7554	Pag	<sub>le</sub> 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<del></del>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u> 665</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		02:	
3	Revenue less expenses. Subtract line 2 from line 1	3	10	)63	<u>86.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	311	<u> 135</u>	<u>05.</u>
5	Net unrealized gains (losses) on investments	5	17	745	<u>49.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	339	44	<u>40.</u>
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	·		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	]	l	
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,	1 1		
	consolidated basis, or both		1		
	Separate basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			ļ	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt		İ	
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	<b>990</b> (	2013)

## **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

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

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

Springfield Symphony Foundation

Employer identification number

<b>D</b> -		Dagaan	Springf	ield Symphon	y Fou	ndati	on_			31-6077554				
_	ırt I			<del></del>	nizations must complete this part.) See instructions.									
	organ		•	because it is: (For lines	•	-	•	•						
1	H	•		s, or association of chur		ndea in se	ection 170	(b)(1)(A)(i)	).					
2	片			'0(b)(1)(A)(ii). (Attach Sc		in <b>a</b> :	470/5/41	( A \( !!!\						
3	片	•	•	tal service organization					/L\/ 4\/ A\/::	::) Entor	the honoitel	l'a nam		
4	لـــا		•	operated in conjunction	with a nos	pital desc	nbed in <b>se</b>	ection 170	(D)(T)(A)(II	ı). Enter	trie riospitai	s nam	æ,	
_		city, and stat		benefit of a college or u	niversity o	wned or or	perated by	. a governi	mental un	t describ	and in			
5	ш	•	(b)(1)(A)(iv). (Comple	•	iliversity O	wiled of O	Derated by	a governi	mental uni	i descrit	Jeu III			
_	$\Box$			ent or governmental uni	t describer	d in sectio	n 170/h)/·	11/41/51						
7	Ħ		. •	•					or from the	nonoral	nublic desc	nhad ii	n	
•		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)												
8				ection 170(b)(1)(A)(vi).	(Complete	Part II )								
9	一	•		eives: (1) more than 33		•	rom contri	butions m	nembershi	n fees a	and aross rea	ceints f	from	
Ū		•		nctions - subject to certa							_			
			•	axable income (less sect	•	•	•				•			
			509(a)(2). (Complete	,		.,			, o.g.		u	,	•	
10				perated exclusively to te	st for publ	c safety. S	See sectio	n 509(a)(4	<b>4</b> ).					
	$\overline{\mathbf{x}}$	_	•	perated exclusively for the	-	•			•	y out the	purposes o	of one o	or	
		-	-	ations described in secti						-				
				organization and compl					-					
		a X Type I			ype III - Fu			c	тур	e III - No	n-functional	ly integ	grated	
е	X	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one or	r more dis	qualified	persons oth	ner tha	n	
		foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or	section 509	)(a)(2).		
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
		supporting or	rganization, check th	nis box										
g	•	Since August	t 17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?				
		(i) A person	n who directly or ind	rectly controls, either al	lone or tog	ether with	persons o	described	ın (ii) and (	ııi) below	',	Yes	No	
		the gove	erning body of the si	upported organization?							11g(i)		X	
		(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)		X	
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	∍?					11g(iii)	<u> </u>	X	
h		Provide the fe	ollowing information	about the supported or	ganızatıon	(s).								
					1				·		,			
(i)	Name	of supported	(ii) EIN	(iii) Type of organization			(v) Did you		(vi) Is organizatio	the	(vii) Amount	t of mor	netary	
	orga	ınızatıon		(described on lines 1-9	in col. (i) lis governing			ion in col.	(i) organiz	ed in the	sup	port		
				above or IRC section (see instructions))					U.S					
		61 33		,	Yes	No	Yes	No	Yes	No				
Sp	rın	gfield	21 6000540		<b></b>		l			1	_ ا	000	~ <del>-</del>	
Sy	mpn	ony Orc	31-6000540	1	X		Х	<del>                                     </del>	X	ļ	1	280	<u>37.</u>	
										1				
	<del></del>				ļ	-	-		<del> </del>	<del> </del>	ļ			
							]		1					
	-						<del>                                     </del>	<del> </del>		-	-			
					<b>†</b>	<u> </u>								
								1						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

<u> 128037.</u>

332021 09-25-13

Pa	rt II Support Schedule for						
	(Complete only if you checke				on failed to qualify	under Part III. If the	organization
	fails to qualify under the tests	isted below, plea	se complete Part	111.)			
	ction A. Public Support		1	T			
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and					i l	
	membership fees received. (Do not						
_	include any "unusual grants.")				<del>                                     </del>	-	
2	Tax revenues levied for the organ-			:			
	ization's benefit and either paid to		İ				
_	or expended on its behalf				<u> </u>		
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge			_	-		
	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)	· · · · · · · · · · · · · · · · · · ·	<u> </u>		+		
	Public support. Subtract line 5 from line 4	L	<u> </u>	1	<u>.                                    </u>		
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	(4) 2000	(6) 2010	(6) 2011	(d) 2012	(6) 2010	(I) Total
	Gross income from interest,						
Ü	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 Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)	•	<u> </u>	12	
	First five years. If the Form 990 is for	•		d, fourth, or fifth t	ax year as a section		
	organization, check this box and stop	-		· ·		(-/(-/	ightharpoons
Sed	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (	ine 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2012	? Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2013. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or i	more, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			▶□
b	33 1/3% support test - 2012. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation	•		▶□
17a	10% -facts-and-circumstances tes	-					•
	and if the organization meets the "fac			•		art IV how the organ	nization
	meets the "facts-and-circumstances"	_	•		-		ightharpoonup
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not o	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the				•		•
	organization meets the "facts-and-circ		_				
18	Private foundation. If the organization	<u>in did not check a</u>	box on line 13, 16	a, 16b, 17a, or 17		-	
					Sch	edule A (Form 990	or 990-F7) 2013

332022 09-25-13

# Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and						_
	membership fees received. (Do not						
	include any "unusual grants.")				ļ		
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities				-		
•	furnished by a governmental unit to						
	the organization without charge						
۵	Total. Add lines 1 through 5				1		
	Amounts included on lines 1, 2, and		-				
18	3 received from disqualified persons						
,	Amounts included on lines 2 and 3 received				<del>                                     </del>	<del> </del>	
•	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year					<del> </del>	<del> </del>
	Add lines 7a and 7b					<del>  </del>	<u> </u>
	Public support (Subtract line 7c from line 6)		L	<u> </u>	1		<del></del>
	ction B. Total Support		#3 CO4 C	(1) 0044	(,0,0040	(-) 0010	(0 T-+-1
	endar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	Amounts from line 6				1	1	
102	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						<u>L </u>
12	Other income. Do not include gain						
	or loss from the sale of capital		İ	·			
13	assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization's	s first, second. thu	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation.
. •	check this box and stop here	J. garneanoll	,,	_, , <b>_</b>	,	(-/(-/ 0.84/11	<b>▶</b> □
Se	ction C. Computation of Publ	ic Support Pe	rcentage			<del></del>	
	Public support percentage for 2013 (I			column (fl)		15	%
	Public support percentage from 2012	,	•	-····· V·//	• •	16	<u>%</u>
	ction D. Computation of Inves				<del> </del>	1.19.1	,,,
	Investment income percentage for 20		-		<u> </u>	17	%
	Investment income percentage from	•	• • • • • • • • • • • • • • • • • • • •	10, 001011111 (1))		18	
	a 33 1/3% support tests - 2013. If the			on line 1/L and lin	e 15 is more than		
197	- ·	•					1, 19 HOL
	more than 33 1/3%, check this box a	=					and .
1	33 1/3% support tests - 2012. If the	_					. —
^^	line 18 is not more than 33 1/3%, che			•		-	
20	Private foundation. If the organization	n dia not check a	box on line 14, 19	ra, or 190, check t	nis box and see in	structions	

Schedule A	(Form 990 or 990-EZ) 2013 Springfield	Symphony	<u>Foundation</u>	31-6077554 Page
Part IV	(Form 990 or 990 EZ) 2013 Springfield Supplemental Information. Provide the ex	cplanations required	d by Part II, line 10; Part II, II	ne 17a or 17b; and Part III, line 12.
	Also complete this part for any additional informat	•		,,,
	<del></del>			
	· · · · · · · · · · · · · · · · · · ·	•	•	
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Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

Chrinafield Cymphony Foundation

**Employer identification number** 31-6077554

Pa	rt I Organizations Maintaining Donor Advise		s or Accounts. Complete if the
L	organization answered "Yes" to Form 990, Part IV, line		•
	3	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		·
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
_	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	used only
_	for chantable purposes and not for the benefit of the donor of		-
	Impermissible private benefit?		. Yes No
Pa		ganization answered "Yes" to Form 990, F	
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements if		. L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year >
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year ► \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		. L Yes L No
9	In Part XIII, describe how the organization reports conservati	•	
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
Da	conservation easements.	f Art. Historical Transcurse, or C	Mhor Cimilar Assats
Pa	rt III Organizations Maintaining Collections o		Miner Similar Assets.
_	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		A
b	• • • • • • • • • • • • • • • • • • • •	• •	· ·
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		<b>.</b>
	(i) Revenues included in Form 990, Part VIII, line 1		<b>~ ~ ~ ~ ~ ~ ~ ~ ~ ~</b>
_	(ii) Assets included in Form 990, Part X	nource or other availages as the faulti-	<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre		ai gairi, provide
_	the following amounts required to be reported under SFAS 1	TO (MOC 900) relating to these items:	<b>*</b>
a	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X	•	<b>~</b> <del></del>
b		·	. <b>•</b> •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Part   V   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990. Part X, line 21.  1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:    C			ield Sympho				31-60			age <b>2</b>
Check all that apply):	Par									
a Public exhibition d Loan or exchange programs b Scholarly research e Other Other Other Other Other Other Preservation for future generations explain how they further the organization's exempt purpose in Part XIII.  Part IV Exported a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Part IV Exported an amount on Form 990, Part X, line 21.  Is the organization an angent, furstee, custodial arrangements. Complete of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table:  Beginning balance  C Beginning balance  If I Hyes, explain the arrangement in Part XIII and complete the following table:  Beginning balance  Additions during the year  Databalance or a second or form 990, Part X, line 217  Diff "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (a) Four years back (d) Three years bac	3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that are a	significant	use of its	collectio	n item	s
b Scholarly research e Other   Preservation for future generations   Preservation for future generations   Preservation for future generations   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIII.    5 During the year, dut the organization solicit or recove donations of air, historical treasures, or other similar asserts to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Parl IV, line 9, or reported an amount on Form 990, Parl X, line 21.    1a Is the organization an agent, trustee, custodian or other infermediary for contributions or other asserts not included on Form 990, Parl X?    1b If "Yes," explain the arrangement in Parl XIII and complete the following table:  1c Beginning balance   Additions during the year   1d		(check all that apply):		<del></del>						
C Preservation for future generations 4 Provide a description of the triggenization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV   Excrow and Custodial Arrangements. Complete of the organization answered "Yes" to Form 990, Part IV, Itine 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table.  C Beginning balance  c Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  2 Distributions during the year  f Ending balance  a Beginning of year balance  [a) Current year (b) Prior year (c) Two years back (q) Times years back (q) Four years back  Donitional form of the organization and asset of the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  [a) Current year (b) Prior year (c) Two years back (q) Times years back (q) Four years back  Donitional form of the organization and the properties of the organization and the organization and programs  f Administrative expenses  12411, 12744, 13540, 18262, 1634  g End of year balance properties of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	а	Public exhibition	d		change programs					
4. Provide a description of the organization's collections and explain how they further the organization's expensive to be sold to rase funds rather than to be maintained as part of the organization's collection?    Part IV   Escrow and Custodial Arrangements. Complete if the organization's collection?   Part IV   Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 90, Part IV, Ine 9, or reported an amount on Form 990, Part X ine 21.   1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X ine 21.   1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X ill and complete the following table:   C   Beginning balance   Armount   1c   Id   Id   Id   Id   Id   Id   Id   I	b	Scholarly research	е	Other				. —		
5 Duning the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?    Part IV   Escrow and Gustodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, Ine 9, or reported an amount on Form 990, Part X, Ine 21.    Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   If "Yes," explain the arrangement in Part XIII and complete the following table:	C	Preservation for future generations								
to be sold to rase funds rather than to be maintained as part of the organization's collection? Yes N Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, Ine 9, or reported an amount on Form 990 Part X, Ine 21.  1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Ine 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table:  □ Beginning balance □ Beginning balance □ Beginning balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions □ Beginning of year balance □ Beginning of year balance □ Beginning of year balance □ Not investment earnings, gains, and losses □ Segman of year balance □ Cher expenditures for facilities □ Amount □ Yes ■ N □ If Yes ■ N □	4	Provide a description of the organization's co	llections and explair	how they further t	the organization's ex	empt purp	ose in Parl	XIII.		
Eart   V   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990. Part X, line 21.  1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X?    Ves   N   If "Yes," explain the arrangement in Part XIII and complete the following table:    C   Additions during the year   1d   1d   1d   1d   1d   1d   1d   1	5	• •				ar assets		_	_	,
reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  1 Ending balance  2 Dot the broaganization include an amount on Form 990, Part X, line 21?  b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  1b Contributions  1c Not investment earnings, gains, and losses  168701, 132743, 36333, 297895, 18089, d Grants or scholarships  65986, 65846, 64299, 80517, 5132  6 Other expenditures for facilities and programs  1 Administrative expenses  1 Administrative expenses  1 Part XIII. 12744, 13540, 18262, 1634  2 Provide the estimated percentage of the current year end balance (line 1g, column (ai)) held as:  a Board designated or quasi-endowment    3 Board designated or quasi-endowment    3 Act there endowment Image 2a, 2b, and 2c should equal 100%  3a Are there endowment Image 2a, 2b, and 2c should equal 100%  5 If "Yes" to 38(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization that are held and administered for the organization by:  (ii) unrelated organizations  (iii) related organizations  (iii) related organizations  (iv) related organization  (iv) related organization  (iii) related organization  (iv) related organization  (iii) related organization  (iv) related organization  (iii) related organization  (iv) related organization  (iii) property  (iv) Line 11a. See Form 990, Part X, line 10.  Complete if the organization answered "Yes" to Form 990, Part X, line 11a. See Form 990, Part X, line 10.  Complete if the organization answered "Yes" to Form 990, Part Y, line 11a. See Form 990						•				<u>No</u>
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par	<del></del>	-	te if the organization	on answered "Yes" t	o Form 99	0, Part IV, I	ıne 9, or		
on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance d Additions during the year e Distributions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 217 b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance 1 8321272, 1765119, 1807525, 1608609, 149539.  1b Contributions 1 821272, 1765119, 1807525, 1608609, 149539.  1c Net investment earnings, gains, and losses 1 68701, 132743, 36333, 297895, 18089.  1d Grants or scholarships 6 65986, 66846, 64299, 80617, 5132.  2 Provide the estimated percentage of the current year end balance (line 1g, collumn (a)) held as: a Board designated or quasiendowment ►  3 Board designated or quasiendowment F  5 Permanent endowment F  6 Temporarily restricted endowment F  5 Permanent endowment F  6 Temporarily restricted endowment F  7 Temporarily restricted endowment F  8 De Permanent endowment F  9 Permanent endowment F  10 Unrelated organizations 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated organization 10 Unrelated org										
b if "Yes," explain the arrangement in Part XIII and complete the following tables:    Amount   Ic   Ic   Ic   Ic   Ic   Ic   Ic   I	1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	ns or other assets n	ot included	' <u> </u>	7		7
C   Beginning balance   C   Beginning balance   C   Beginning balance   C   Beginning balance   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the year   C   Besthoutsons during the organization include an amount on Form 990, Part X, line 21?   Yes   N   Part X   Besthoutsons   C   Besthoutsons   Besthoutsons   C   Besthoutsons   Be		,					L	」 Yes	L	No
C   Beginning balance   10   11d	b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:						
d Additions during the year    Distributions during the year   10   10   10   10   10   10   10   1								Amoun	t	
E Distributions during the year f Ending balance 2 Distributions during the year of Ending balance 1 Distributions during the year of Part X III	С	Beginning balance .				. <u>1c</u>				
1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Part V   Endowment Funds or Funds   Part V   Endowment   Part V   Endowment Ive Ives Ives Ives Ives Ives Ives Ives	d	Additions during the year .				1d				
2a   Did the organization include an amount on Form 990, Part X, line 21?	е	Distributions during the year				1e				
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part N, line 10.	f	<del>-</del>				1f	<u> </u>			
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Comparison   Com		•						<b>」Yes</b>	<u> </u>	No
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (e) Four years back   (d) Three years back   (e) Four years years   (e) Four years years   (e) F										<u> </u>
18 Beginning of year balance   1821272,   1766119,   1807625,   1608609,   149539;   1608609,   149539;   1608609,   149539;   180809   1	Par	t V   Endowment Funds. Complete if			· · · · · · · · · · · · · · · · · · ·	I		_		
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment Mark Mark Mark Mark Mark Mark Mark Mark		-	(a) Current year		1	1	years back	(e) Fou		
c Net investment earnings, gains, and losses d'arants or scholarships 65986. 66846. 64299. 80617. 5132  e Other expenditures for facilities and programs  f Administrative expenses 12411. 12744. 13540. 18262. 1634.  g End of year balance 1911576. 1821272. 1766119. 1807625. 160860  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (iii) related organizations (iii) related organizations (iii) related organizations  5b If "Yes" to 3a(ii), are the related organization issed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  basis (other)  c Leasehold improvements d Equipment c Leasehold improvements d Equipment e Other	1a		1821272.	1766119	1807625	•	1608609.		1495	390.
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses  12411, 12744, 13540, 18262, 1634 g End of year balance 1911576, 1821272, 1766119, 1807625, 160860  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	b	· · · · · · · · · · · · · · · · · · ·		2000						
e Other expenditures for facilities and programs  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f Administrative expenses  f 12411, 12744, 13540, 18262, 16346  f 1821272, 1766119, 1807625, 160860  g Accolumn (a)) held as:  a Board designated or quasi-endowment  // Expension in expensions  f Administrative expenses  f Permanent endowment  // Expension in expensions  f The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation  depreciation	С	Net investment earnings, gains, and losses	168701.	132743	36333	•——	297895.			
and programs f Administrative expenses g End of year balance 12411, 12744, 13540, 18262, 163860  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	d	·	65986.	66846	64299	<del></del>	80617.		51	329.
f Administrative expenses g End of year balance 1911576, 1821272, 1766119, 1807625, 160860  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated or quasi-endowment  Board designated endowment  Board designated endowment  Board designated or quasi-endowment  Board designated endowment  Board endowment  Board endownen	е	Other expenditures for facilities								
g End of year balance  1911576, 1821272, 1766119, 1807625, 160860  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quas-endowment						ļ <u>-</u>				
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶	f	· · · · · · · · · · · · · · · · · · ·	12411.	12744	1	1				
a Board designated or quasi-endowment	9	-					1807625.		1608	609.
b Permanent endowment \	2		ent year end balance		a)) held as:					
Temporarily restricted endowment ▶	а	-		_%						
The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  b Buildings  c Leasehold improvements d Equipment e Other										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	С	· · · ·	_ <del></del>							
by: (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements d Equipment e Other		•								
(ii) unrelated organizations (iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements d Equipment e Other	За	Are there endowment funds not in the posses	ssion of the organiza	ition that are held a	and administered for	the organ	ızatıon	ı		
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other		-								No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other		-			:				_X_	
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation  1a Land buildings c Leasehold improvements d Equipment c Other basis (investment)		* *						3a(ii)		<u>X</u>
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other	b	.,,	•					_3b		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other				wment funds				-		
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Book value  (f) Book value  (f) Cost or other basis (other)  (f) Cost or other basis (other)  (f) Accumulated depreciation  (f) Book value  (f) Book value  (f) Accumulated depreciation	Par									
basis (investment) basis (other) depreciation  1a Land b Buildings c Leasehold improvements d Equipment e Other		<del></del>					. 1			
b Buildings c Leasehold improvements d Equipment e Other		Description of property	, , ,	1 , ,				(d) Boo	k valu	e 
c Leasehold improvements d Equipment e Other	1a	Land								
d Equipment e Other	b	Buildings								
e Other	C	Leasehold improvements								
	d	Equipment								
Total Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	<u>e</u>	Other .								
Total. Add lines to through to total minitary mast equal to one coo, it at it, column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and in the column (b), mile total to an income and i	Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c))		•			0.

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	(Form 990) 2013 Springfield	Symphony Fou	ndation	31	-6077554	Page 3
Part VII	Investments - Other Securities.	_				
( ) D	Complete if the organization answered "Yes"					
	tion of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	1-ot-year market va	ue
•	ał derivatives					
	held equity interests			. <u>.</u>		
3) Other						
(A)						
(B)					<del></del>	
(C)		<del> </del>				
(D)		ļ				
(E)						
<u>(F)</u>						
(G)						
(H)				<u> </u>		
	o) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments - Program Related.					
	Complete if the organization answered "Yes"		11c. See Form 990, I	Part X, line 13.		
	(a) Description of investment	(b) Book value	(c) Method of v	aluation. Cost or end	I-ot-year market val	uө
(1)	<del></del>					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)				<del></del> .		
(8)						
(9)	<u> </u>					
	o) must equal Form 990, Part X, col. (B) line 13.)					
Part IX	Other Assets.					
	Complete if the organization answered "Yes"		11d See Form 990, I	Part X, line 15.		
	(a)	Description			(b) Book valu	e
(1)						
(2)						
(3)						
(4)						
(5)						_
(6)		· <u>·</u>			<u></u>	_
(7)						
(8)	· · · · · · · · · · · · · · · · · · ·					
(9)						
	mn (b) must equal Form 990, Part X, col. (B) lin	e 15.)	w-	<b>&gt;</b>		
Part X	Other Liabilities.					
	Complete if the organization answered "Yes"			990, Part X, line 25.		
l <b>.</b>	(a) Description of liability		(b) Book value			
(1) Fed	eral income taxes					
(2)						
(3)	<del> </del>		<u> </u>			
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Colu	mn (b) must equal Form 990, Part X, col. (B) lin	e 25)				
2. Liability	for uncertain tax positions. In Part XIII, provide	e the text of the footnote to	the organization's f	inancial statements t	that reports the	
organiza	ation's liability for uncertain tax positions unde	r FIN 48 (ASC 740). Check	here if the text of the	e footnote has been	provided in Part XI	II 🔲
				Sch	edule D (Form 990	)) 2010
32053 9-25-13						

Schedule D (Form 990) 2013 Springfield Symphony F		31-6077554 Page
Part XI Reconciliation of Revenue per Audited Financial St	atements With Revenue	per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, II	ne_12a	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	
<b>b</b> Donated services and use of facilities	. 2b	
c Recovenes of prior year grants	. 2c	
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1	_	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	
b Other (Describe in Part XIII.)	. 4b	
c Add lines 4a and 4b		4c
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	. 5
art XII Reconciliation of Expenses per Audited Financial S	tatements With Expens	es per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, II	<del>-</del>	•
Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	•	·   · ·   · · · · · · · · · · · · · · ·
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	<del></del>
c Other losses	2c	
d Other (Describe in Part XIII )	2d	
e Add lines 2a through 2d	_ Zu	2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	•	3
Landau Anna Anna Anna Anna Anna Anna Anna An	4a	
	4b	
	[40]	40
		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Part XIII Supplemental Information.	18)	5
es 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b; and 4b; and Part XII, lines 2d and 4b Also complete this part to provide and 4b;		
xplanation: Support of the Springfield :	Symphony Orchest	ra
<del></del>		
		<del></del>

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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.

OMB No 1545-0047	2013	Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization							Employer identification number
SDETINGLICELG SYMDIC Part I General Information on Grants and Assistance	SDETINGTIETO SYMPHONY ation on Grants and Assistance	ny roundation	TIO				#CC//00-TC
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	e amount of the grants	s or assistance, the	grantees' eligibility	for the grants or ass	sistance, and the selec	
critena used to award the grants or assistance?	stance?	:			•		X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for moni	toring the use of grant	t funds in the Unite	d States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any required that received more than \$5,000. Bart II can be dissipated if additional space is needed.	Governments and	d Organizations in the	e United States. (	Somplete if the orga	anization answered "\	res" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Springfield Symphony Orchestra Association - P. O. Box 1374 - Springfield. OH 45501	31-600540	501(c)(3)	128037.	0			Development and production of musical arts
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	rganizations listed in the	he line 1 table				<b>A</b>
3 Enter total number of other organizations listed in the line 1 table	is listed in the line	1 table		:			Schodula I (Form 000) (2013)
LTA TO FADE WOLK DEGICION ACCINON							

Page 2 (f) Description of non-cash assistance 31-6077554 (e) Method of valuation (book, FMV, appraisal, other) (Form 990) (2013) Springfield Symphony Foundation Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2013)
Part III Grants and Other

Schedule I (Form 990) (2013)

26

332102 10-29-13

## SCHEDULE O

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Employer identification number

Open to Public

OMB No 1545-0047

➤ Attach to Form 990 or 990-EZ. Department of the Treasury ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Internal Revenue Service

Inspection

31-6077554 Springfield Symphony Foundation Form 990, Part I, Line 1, Description of Organization Mission: Springfield Symphony Orchestra. Form 990, Part VI, Section B, line 11: Explanation: The 990 is e-mailed to the board members for review. Form 990, Part VI, Section B, Line 12c: Explanation: The policy is handed out and reviewed during a meeting each year. Form 990, Part VI, Section C, Line 19: Explanation: The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

► See separate instructions.

20.	

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2013 Open to Public

(g) Section 512(b)(13) **Employer identification number** ž × controlled Direct controlling Yes 31-6077554 entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling End-of-year assets **e** status (if section Public charity 501(c)(3)) Total income Exempt Code 501(c) (3) Legal domicile (state or Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) Springfield Symphony Foundation Development & production Primary activity Primary activity of musical arts 31-6000540, P. O. Box 1374, Springfield, OH Springfield Symphony Orchestra Association Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Name of the organization Part Part 45501

Schedule R (Form 990) 2013

31-6077554

Page 2

Schedule R (Form 990) 2013 Springfield Symphony Foundation

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.

organizations treated as a partitionally unitig the tax year.	en europ during en in	7 year.	6	٥		€	(5)	3	6	9	8
(a) Name, address, and EIN of related organization	Pnmary activity	Legal domicile (state or foreign country)	trolling y	reforminant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of end-of-year assets	Disproportionate allocations?  Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage. managing ownership
											• 
											_
								-			
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year.	ganizations Taxable a rporation or trust duni	as a Corport	oration or Trust Co	mplete if the or	ganization ans	wered "Yes" o	n Form 990, F	art IV, line 34	n or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related	one or mo	re related
(a) Name, address, and EIN of related organization	<u>Z</u> c	Prim	(b) Primary activity	(c) Legal domicile Dir (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 Fend-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
										:	<del></del>
						-		_			
332162 09-12-13			<del>.</del>	29					Sched	ule R (Forr	Schedule R (Form 990) 2013

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	2
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	ın Parts II-IV?		-
a Receipt of (i) interest (ii) annuttes (iii) royalties or (iv) rent from a controlled entity		:	•	<b>1</b> a	×
				ф Ж	
				5	×
				10	×
C Foalls of loaf gualantees to of for length of guillantees ()	•	•		ç	>
<ul> <li>Loans or loan guarantees by related organization(s)</li> </ul>				ַם	4
				÷	×
f Dividends from related organization(s)			. ::	=	<b>4</b> :
g Sale of assets to related organization(s)	•	:		1 <u>9</u>	×
h Purchase of assets from related organization(s)			::	<b>1</b>	×
				÷	×
i Lease of facilities, equipment, or other assets to related organization(s)			:	1j	×
	:				
k Lease of facilities, equipment, or other assets from related organization(s)	:	:	:	¥	×
1 Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ē	×
n Shanno of facilities, equipment, mailing lists, or other assets with related organization(s)	hon(s)			Ę	×
				9	×
O STATILIG OF PAID OFFICE WILL FRANCE OF SALLES AND THE STATE OF SALLES AND THE S					
Domestic months and to related organization(s) for expanses				<b>£</b>	×
				Ę	×
q Heimbursement paid by related organization(s) for expenses.			:	2	-
. Other tenents of each or prepared to related erganization(e)				<b>+</b>	×
	:			Ų.	×
s Other transfer of cash or property from transaction that the property for information on who must complete this line including covered relationships and transaction thresholds	the stellamon tall an order	and and any area	relationships and transaction thresholds	2	
2 If the answer to any of the above is "Yes, see the instructions for information on w	WIIO HIGST CONTIDUETO II	is inte, including covered	ישומיוטיוטיון איישוט מעום איישוט איישוטיים איי		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved	
(1) Springfield Symphony Orchestra	В	128037.	.Cash		
(3)					
(4)					
(9)				!	
332163 06-12-13	30		Schedule	Schedule R (Form 990) 2013	0) 2013

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Schedule R (Form 990) 2013 Springfield Symphony Foundation

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

ලේ	1	1 1	1 1	19
(k) ercenta ownersh				i i i i i i i i i i i i i i i i i i i
General or P managing partner? Yes No				
Gene Gene Deart Yes				
(h)         (i)         (i)         (k)           Dispropor- busing allocations2 of Schedule K-1 Ses No         Code V-UBI Governage (Form 1065)         General or Percentage - Connership (Form 1065)		;		Schodulo B (Form 000) 2013
(h) Disproportonate allocations? Yes No				
Disp to to Yes				
(g) Share of end-of-year assets				
(f) Share of total income				
Are all partners sec 501(c)(3) orgs 2)				
3d, sd, sd, sd, sd, sd, sd, sd, sd, sd, s				
Predominant income (related, unrelated, excluded from tax under section 512-514) y				
iicile reign /)				
(c) Legal domicile (state or foreign country)	!			
) <u>1</u> (8)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R	(Form 990) 2013	<u>Springfield</u>	Symphony	<u>Foundation</u>	<u>31-6077554</u>	Page 5
Part VII	(Form 990) 2013 Supplemental Info	rmation				
L	Provide additional inform	nation for responses to qu	petions on Schadi	Ila R (eas instructions)		
	Flovide additional intoll	nation for responses to qui	estions on ochedi	de ri (see instructions).		
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