

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
CHICAGO SYMPHONY ORCHESTRA

Doing business as

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

City or town, state or province, country, and ZIP or foreign postal code
CHICAGO, IL 606042559

D Employer identification number
36-2167823

E Telephone number
(312) 294-3333

G Gross receipts \$ 149,619,162

F Name and address of principal officer:
JEFF ALEXANDER
220 S MICHIGAN AVENUE
CHICAGO, IL 606042559

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.CSO.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1890 **M** State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SEE SCHEDULE O - SUPPLEMENTAL INFORMATION. WITH THE CHICAGO SYMPHONY ORCHESTRA AT ITS CORE, THE MISSION OF THE CHICAGO SYMPHONY ORCHESTRA ASSOCIATION IS TO ENRICH, INSPIRE AND TRANSFORM LIVES THROUGH MUSIC, COMMUNITY ENGAGEMENT AND EDUCATION - LOCALLY, NATIONALLY AND INTERNATIONALLY.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	134
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	133
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	1,321
6 Total number of volunteers (estimate if necessary)	6	945
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-52,545
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	35,070,114	30,805,974
9 Program service revenue (Part VIII, line 2g)	32,900,867	27,717,097
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,601,192	13,188,464
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	247,905	338,886
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	81,820,078	72,050,421
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	16,797	600
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	47,366,092	44,876,338
16a Professional fundraising fees (Part IX, column (A), line 11e)	465,361	310,632
b Total fundraising expenses (Part IX, column (D), line 25) ▶4,039,275		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	33,491,182	33,510,321
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	81,339,432	78,697,891
19 Revenue less expenses. Subtract line 18 from line 12	480,646	-6,647,470

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	508,805,441	503,065,284
21 Total liabilities (Part X, line 26)	217,523,215	236,105,778
22 Net assets or fund balances. Subtract line 21 from line 20	291,282,226	266,959,506

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: *****
Date: 2020-05-05

JEFF ALEXANDER PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P01247672
Firm's name ▶ RSM US LLP			Firm's EIN ▶ 42-0714325	
Firm's address ▶ 1 S WACKER DRIVE SUITE 800 CHICAGO, IL 60606			Phone no. (312) 634-3400	

Part 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:

WITH THE CHICAGO SYMPHONY ORCHESTRA AT ITS CORE, THE MISSION OF THE CHICAGO SYMPHONY ORCHESTRA ASSOCIATION IS TO ENRICH, INSPIRE AND TRANSFORM LIVES THROUGH MUSIC, COMMUNITY ENGAGEMENT AND EDUCATION - LOCALLY, NATIONALLY AND INTERNATIONALLY.

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 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 No

If "Yes," describe these changes on Schedule O.

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 others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 47,895,273 including grants of \$) (Revenue \$ 23,268,956)
See Additional Data

4b (Code:) (Expenses \$ 4,276,363 including grants of \$) (Revenue \$ 2,701,874)
See Additional Data

4c (Code:) (Expenses \$ 2,285,501 including grants of \$) (Revenue \$ 277,596)
See Additional Data

See Additional Data Table

4d Other program services (Describe in Schedule O.)
(Expenses \$ 5,105,833 including grants of \$ 600) (Revenue \$ 1,468,671)

4e Total program service expenses ▶ 59,562,970

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political campaign activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (134); 1b Enter the number of voting members included in line 1a, above, who are independent (133); 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? (Yes); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 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? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (No); 11b 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b 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 exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed: AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: STACIE M FRANKVP AND CFO 220 S MICHIGAN AVENUE CHICAGO, IL 606042559 (312) 294-3301

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c	1,662,847		
	d Related organizations	1d			
	e Government grants (contributions)	1e	189,900		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	28,953,227		
	g Noncash contributions included in lines 1a - 1f: \$ _____		12,658,644		
	h Total. Add lines 1a-1f		30,805,974		

Program Service Revenue			Business Code				
	2a TICKET SALES		711130	18,538,125	18,538,125		
	b PERFORMANCE FEES		711130	6,947,186	6,947,186		
	c OTHER PROGRAM RELATED REVENUE		711130	763,983	763,058		925
	d FACILITY RENTAL REVENUE		711130	428,899	428,899		
	e PARKING LOT RENTAL REVENUE		711130	366,788			366,788
	f All other program service revenue.			672,116	110,644	157,037	404,435
	g Total. Add lines 2a-2f			27,717,097			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			6,161,973			6,161,973
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		272,034					
	b Less: rental expenses	447,870					
	c Rental income or (loss)	-175,836					
	d Net rental income or (loss)			-175,836		-175,836	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		83,303,384	2,121				
	b Less: cost or other basis and sales expenses	76,260,785	18,229				
	c Gain or (loss)	7,042,599	-16,108				
	d Net gain or (loss)			7,026,491		-99,711	7,126,202
	8a Gross income from fundraising events (not including \$ 1,662,847 of contributions reported on line 1c). See Part IV, line 18	a	835,854				
	b Less: direct expenses	b	651,184				
c Net income or (loss) from fundraising events			184,670			184,670	
9a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a	520,725					
b Less: cost of goods sold	b	190,673					
c Net income or (loss) from sales of inventory			330,052	264,087	65,965		
Miscellaneous Revenue	Business Code						
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See Instructions.			72,050,421	27,051,999	-52,545	14,244,993	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 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 domestic organizations and domestic governments. See Part IV, line 21	600	600		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,370,490	297,329	969,950	103,211
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 salaries and wages	35,034,729	30,749,643	2,616,450	1,668,636
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,601,039	1,432,315	104,537	64,187
9 Other employee benefits	4,693,424	3,640,375	704,080	348,969
10 Payroll taxes	2,176,656	1,769,654	275,257	131,745
11 Fees for services (non-employees):				
a Management				
b Legal	183,164	81,355	79,325	22,484
c Accounting	113,006		113,006	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	310,632			310,632
f Investment management fees	1,335,025		1,335,025	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,598,423	7,134,675	1,441,466	22,282
12 Advertising and promotion	4,370,005	3,925,414	272,124	172,467
13 Office expenses	737,308	374,843	185,653	176,812
14 Information technology	359,824	182,932	90,603	86,289
15 Royalties				
16 Occupancy	2,643,373	2,144,874	225,791	272,708
17 Travel	2,378,783	2,244,908	63,528	70,347
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	147,656	69,913	11,891	65,852
20 Interest	5,539,175		5,539,175	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,008,214	3,669,614	319,976	18,624
23 Insurance	265,942		265,942	
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 O.)				
a CREDIT CARD FEES	632,098	544,427		87,671
b MUSIC & INSTRUMENT RENT	405,638	296,940	108,698	
c MUSIC LICENSE FEES	322,759	322,759		
d EQUIPMENT RENTAL & MAIN	317,183	317,183		
e All other expenses	1,152,745	363,217	373,169	416,359
25 Total functional expenses. Add lines 1 through 24e	78,697,891	59,562,970	15,095,646	4,039,275
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	3,337,197	1	758,808
	2 Savings and temporary cash investments	6,248,820	2	8,520,529
	3 Pledges and grants receivable, net	29,665,654	3	21,502,271
	4 Accounts receivable, net	500,701	4	377,046
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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 instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	161,401	8	227,672
	9 Prepaid expenses and deferred charges	2,259,792	9	2,051,621
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	179,011,240		
	b Less: accumulated depreciation	94,253,426		
	11 Investments—publicly traded securities	262,692,776	11	271,139,282
	12 Investments—other securities. See Part IV, line 11	116,037,890	12	113,615,553
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	83,895	15	114,688
16 Total assets. Add lines 1 through 15 (must equal line 34)	508,805,441	16	503,065,284	
Liabilities	17 Accounts payable and accrued expenses	5,832,563	17	7,170,596
	18 Grants payable		18	
	19 Deferred revenue	13,134,344	19	13,157,478
	20 Tax-exempt bond liabilities	140,876,312	20	140,915,726
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		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	57,679,996	25	74,861,978
	26 Total liabilities. Add lines 17 through 25	217,523,215	26	236,105,778
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	105,398,828	27	75,021,838
	28 Temporarily restricted net assets	48,878,790	28	44,318,350
	29 Permanently restricted net assets	137,004,608	29	147,619,318
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	291,282,226	33	266,959,506	
34 Total liabilities and net assets/fund balances	508,805,441	34	503,065,284	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	72,050,421
2	Total expenses (must equal Part IX, column (A), line 25)	2	78,697,891
3	Revenue less expenses. Subtract line 2 from line 1	3	-6,647,470
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	291,282,226
5	Net unrealized gains (losses) on investments	5	2,478,220
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-20,153,470
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	266,959,506

Part 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: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

		Yes	No
2a			No
2b	Yes		
2c	Yes		
3a			No
3b			

Additional Data

Software ID:

Software Version:

EIN: 36-2167823

Name: CHICAGO SYMPHONY ORCHESTRA

Form 990 (2018)

Form 990, Part III, Line 4a:

CHICAGO SYMPHONY ORCHESTRA CONCERTS - DURING THE 2018/19 SEASON, THE CSO PRESENTED 114 PAID AND FREE CONCERT PROGRAMS FOR APPROXIMATELY 233,000 PATRONS. THROUGHOUT THE SEASON, THE CSO PRESENTED 25 WEEKS OF SUBSCRIPTION CONCERTS THAT CALLED ATTENTION TO MUSIC REPRESENTING HISTORIC EVENTS, MODERN MASTERWORKS AND PILLARS OF THE SYMPHONIC CANON. THE CSO PREMIERED TWO WORKS, INCLUDING A COMPOSITION WRITTEN BY JAMES STEPHENSON FOR CSO BASS TROMBONIST CHARLES VERNON. THE CSO EMBARKED ON A 12-CONCERT TOUR OF ASIA AND ALSO COMPLETED A 4-CONCERT TOUR OF FLORIDA. THE FREE CONCERT FOR CHICAGO LED BY MAESTRO MUTI IN CHICAGO'S MILLENNIUM PARK DREW AN AUDIENCE OF 10,000 PEOPLE. THE ORCHESTRA PERFORMED 3 CONCERTS AT WHEATON COLLEGE'S EDMAN MEMORIAL CHAPEL, AND 16 CONCERTS AT RAVINIA PARK AS PART OF THE ANNUAL SUMMER RESIDENCY.

Form 990, Part III, Line 4b:

SYMPHONY CENTER PRESENTS CONCERTS - THE CHICAGO SYMPHONY ORCHESTRA ASSOCIATION OFFERS CONCERTS BY ACCLAIMED GUEST ARTISTS IN THE FIELDS OF JAZZ, POP, WORLD, AND CLASSICAL MUSIC UNDER THE AUSPICES OF SYMPHONY CENTER PRESENTS. THIRTY-SEVEN CONCERTS WERE PRESENTED DURING THE SEASON, WITH MORE THAN 50,000 TICKETS SOLD. THESE CONCERTS FEATURED ESTABLISHED AND EMERGING ARTISTIC LEADERS AND MUSICIANS PERFORMING A WIDE VARIETY OF MUSICAL STYLES FOR DIVERSE AUDIENCES. SCP PROGRAMS INCLUDE ORCHESTRA, CHAMBER, MUSIC NOW AND PIANO MUSIC SERIES, AND JAZZ AT SYMPHONY CENTER, WHICH IS ONE OF THE MOST COMPREHENSIVE AND ACCLAIMED JAZZ SERIES IN THE COUNTRY.

Form 990, Part III, Line 4c:

EDUCATION CONCERTS AND ACTIVITIES - ACROSS CHICAGO AND AROUND THE WORLD, THE NEGAUNEE MUSIC INSTITUTE CONNECTS INDIVIDUALS AND COMMUNITIES TO THE EXTRAORDINARY RESOURCES OF THE CHICAGO SYMPHONY ORCHESTRA. UNDER THE VISIONARY LEADERSHIP OF CSO ZELL MUSIC DIRECTOR RICCARDO MUTI AND JUDSON AND JOYCE GREEN CREATIVE CONSULTANT YO-YO MA, INSTITUTE PROGRAMMING GIVES BROAD ACCESS TO THE CSO, EDUCATES YOUNG LISTENERS, PROVIDES ADVANCED TRAINING TO YOUNG MUSICIANS AND SERVES THE CITY AND THE WORLD THROUGH MUSIC. ALL CONCERTS AND EVENTS ARE INEXPENSIVE OR OFFERED FREE OF CHARGE TO THE PUBLIC IN ORDER TO DISSOLVE FINANCIAL BARRIERS. IN THE 2018/19 SEASON, THE INSTITUTE REACHED APPROXIMATELY 51,000 PEOPLE THROUGH 163 EVENTS WHICH INCLUDED PAID AND FREE CONCERTS, OPEN REHEARSALS, WORKSHOPS AND OTHER PROGRAMS.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 149,398 including grants of \$) (Revenue \$)

RETAIL SALES - MUSIC-RELATED MERCHANDISE IS AVAILABLE FOR PURCHASE AT THE SYMPHONY STORE.

(Code:) (Expenses \$ 171,161 including grants of \$) (Revenue \$)

RENTALS AND COMMISSIONS - A CLUB IS AVAILABLE TO DONORS FOR DINING PRIOR TO CSO CONCERTS.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:)	(Expenses \$ 832,247	including grants of \$)	(Revenue \$ 428,899)
RENTALS AND COMMISSIONS - PERFORMANCE SPACE PROVIDED TO CHICAGOLAND ARTS ORGANIZATIONS.			

(Code:)	(Expenses \$ 555,007	including grants of \$)	(Revenue \$ 333,168)
RENTALS AND COMMISSIONS - A RESTAURANT AND CONCESSIONS ARE PROVIDED FOR AUDIENCES ATTENDING CONCERTS.			

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 204,715 including grants of \$) (Revenue \$ 366,788)
RENTALS AND COMMISSIONS - PARKING LOT PROVIDED FOR AUDIENCES' CONVENIENCE TO ATTEND CONCERTS.

(Code:) (Expenses \$ 706,533 including grants of \$) (Revenue \$ 90,139)
MEDIA AND ROYALTY - RADIO BROADCAST SERIES, IN-HOUSE RECORDING LABEL, AUDIO RECORDINGS IN COMPACT DISC AND DIGITAL DOWNLOAD FORMATS.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 2,390,134 including grants of \$ 600) (Revenue \$ 92,640)

CIVIC ORCHESTRA CONCERTS = 2018/19 MARKED THE 100TH SEASON OF THE CIVIC ORCHESTRA OF CHICAGO. FOUNDED DURING THE 1919/20 SEASON BY THE CSO'S SECOND MUSIC DIRECTOR, FREDERICK STOCK, THE CIVIC ORCHESTRA HAS TRAINED OVER 7,000 YOUNG MUSICIANS WHILE PRESENTING FREE CONCERTS AT SYMPHONY CENTER AND IN COMMUNITIES THROUGHOUT CHICAGOLAND. TO CELEBRATE THE CENTENNIAL, THE CIVIC OPENED ITS SEASON WITH A SIDE-BY-SIDE CONCERT WITH THE CSO IN MILLENNIUM PARK CONDUCTED BY RICCARDO MUTI. THROUGHOUT THE SEASON A SERIES OF SPECIAL CONCERTS MARKED CIVIC'S HISTORIC MILESTONE WITH BANNER PROGRAMMING INCLUDING A PERFORMANCE OF MAHLER'S SIXTH SYMPHONY CONDUCTED BY CSO SIR GEORG SOLT CONDUCTING APPRENTICE ERINA YASHIMA; JANEK'S SINFONIETTA, LED BY CSO GUEST CONDUCTOR EDWARD GARDNER AND FEATURING A BRASS CHOIR COMPRISED OF CIVIC ALUMNI; THE WORLD PREMIERE OF A CIVIC CO-COMMISSIONED CONCERTO FOR PERCUSSION AND ORCHESTRA BY CHRIS CERRONE FEATURING THIRD COAST PERCUSSION AS SOLOISTS (AN ENSEMBLE WITH TWO MEMBERS WHO ARE CIVIC ALUMNI) CONDUCTED BY KEN-DAVID MASUR; AND A SEASON FINALE COLLABORATION WITH THE RYAN OPERA CENTER AT THE LYRIC OPERA OF CHICAGO FEATURING THE FULL COMPANY OF 12 SINGERS UNDER THE DIRECTION OF MICHAEL CHRISTIE. THE CIVIC ORCHESTRA DEEPENED ITS COMMITMENT TO MENTORING YOUNG MUSICIANS AND SERVING COMMUNITIES ACROSS THE CITY BY PRESENTING SPECIAL PROJECTS INCLUDING THE FIFTH ANNUAL BACH MARATHON, DURING WHICH CHAMBER ENSEMBLES PERFORMED J.S. BACH'S SIX BRANDENBURG CONCERTOS AT FOOD PANTRIES AND FOURTH PRESBYTERIAN CHURCH; A DAY-LONG WORKSHOP OF COACHINGS AND SIDE-BY-SIDE REHEARSAL WITH YOUNG MUSICIANS FROM THREE COMMUNITY YOUTH ORCHESTRAS OPERATED BY THE PEOPLE'S MUSIC SCHOOL, SISTEMA RAVINIA AND THE CHICAGO METAMORPHOSIS ORCHESTRA PROJECT; AND CIVIC CHAMBER ENSEMBLES PERFORMED OVER 25 CONCERTS IN NEIGHBORHOOD VENUES SUCH AS THE NATIONAL MUSEUM OF MEXICAN ART, INDIAN BOUNDARY PARK AND THE ZHOU B ART CENTER. FIFTEEN CIVIC MUSICIANS WERE APPOINTED AS FELLOWS AND RECEIVED ADDITIONAL ARTISTIC AND PROFESSIONAL DEVELOPMENT THAT ENHANCED THEIR MEMBERSHIP IN THE FULL ORCHESTRA. OVER THE COURSE OF THE SEASON, THESE FELLOWS PARTICIPATED IN NUMEROUS WORKSHOPS ADDRESSING TOPICS SUCH AS GRANT WRITING, COMMUNITY ENGAGEMENT PROJECT DESIGN, INTERACTIVE PERFORMANCE AND COLLABORATIVE COMPOSITION.

(Code:) (Expenses \$ 96,638 including grants of \$) (Revenue \$ 157,037)

OTHER PROGRAM SERVICES - PROGRAM BOOK ADVERTISING

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JEFF ALEXANDER PRESIDENT	40.00	X		X				529,499	0	35,017
HELEN ZELL CHAIRMAN	1.90	X		X				0	0	0
MARY LOUISE GORNO VICE CHAIRMAN	0.80	X		X				0	0	0
ROBERT A KOHL VICE CHAIRMAN	0.50	X		X				0	0	0
LIISA THOMAS VICE CHAIRMAN	0.90	X		X				0	0	0
JAMES W MABIE TREASURER	0.80	X		X				0	0	0
WILLIAM ADAMS IV LIFE TRUSTEE	0.80	X						0	0	0
MRS ROBERT A BEATTY LIFE TRUSTEE	0.10	X						0	0	0
MARSHALL BENNETT LIFE TRUSTEE	0.10	X						0	0	0
ARNOLD M BERLIN LIFE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM G BROWN LIFE TRUSTEE	0.10	X						0	0	0
DEAN L BUNTROCK LIFE TRUSTEE	0.10	X						0	0	0
ROBERT N BURT LIFE TRUSTEE	0.10	X						0	0	0
RICHARD W COLBURN LIFE TRUSTEE	0.30	X						0	0	0
RICHARD H COOPER LIFE TRUSTEE	0.10	X						0	0	0
ANTHONY T DEAN LIFE TRUSTEE	0.10	X						0	0	0
DEBORA DE HOYOS LIFE TRUSTEE	0.30	X						0	0	0
CHARLES DOUGLAS LIFE TRUSTEE	0.10	X						0	0	0
JOHN A EDWARDSON LIFE TRUSTEE	0.10	X						0	0	0
THOMAS J EYERMAN LIFE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES B FADIM LIFE TRUSTEE	0.40	X						0	0	0
DAVID W FOX SR LIFE TRUSTEE	0.10	X						0	0	0
RICHARD J FRANKE LIFE TRUSTEE	0.10	X						0	0	0
CYRUS F FREIDHEIM JR LIFE TRUSTEE	0.20	X						0	0	0
H LAURANCE FULLER LIFE TRUSTEE	0.10	X						0	0	0
MRS ROBERT W GALVIN LIFE TRUSTEE	0.10	X						0	0	0
PAUL C GIGNILLIAT LIFE TRUSTEE	0.10	X						0	0	0
JOSEPH B GLOSSBERG LIFE TRUSTEE	0.40	X						0	0	0
WILLIAM A GOLDSTEIN LIFE TRUSTEE	0.40	X						0	0	0
HOWARD L GOTTLIEB LIFE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHESTER A GOUGIS LIFE TRUSTEE	0.30	X						0	0	0
JOYCE T GREEN LIFE TRUSTEE	0.40	X						0	0	0
MARY WINTON GREEN LIFE TRUSTEE	0.20	X						0	0	0
DIETRICH GROSS LIFE TRUSTEE	0.10	X						0	0	0
DAVID P HACKETT LIFE TRUSTEE	0.10	X						0	0	0
JOAN W HARRIS LIFE TRUSTEE	0.20	X						0	0	0
JOHN H HART LIFE TRUSTEE	0.10	X						0	0	0
THOMAS C HEAGY LIFE TRUSTEE	0.10	X						0	0	0
JAY L HENDERSON LIFE TRUSTEE	0.30	X						0	0	0
MRS ROGER B HULL LIFE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JUDITH W ISTOCK LIFE TRUSTEE	0.10	X						0	0	0
WILLIAM R JENTES LIFE TRUSTEE	0.30	X						0	0	0
PAUL R JUDY LIFE TRUSTEE	0.10	X						0	0	0
RICHARD B KAPNICK LIFE TRUSTEE	0.10	X						0	0	0
DONALD G KEMPF JR LIFE TRUSTEE	0.10	X						0	0	0
GEORGE D KENNEDY LIFE TRUSTEE	0.10	X						0	0	0
MRS JOHN C KERN LIFE TRUSTEE	0.20	X						0	0	0
FRED A KREHBIEL LIFE TRUSTEE	0.10	X						0	0	0
CHARLES ASHBY LEWIS LIFE TRUSTEE	0.10	X						0	0	0
EVA F LICHTENBERG LIFE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN S LILLARD LIFE TRUSTEE	0.10	X						0	0	0
DONALD G LUBIN LIFE TRUSTEE	0.10	X						0	0	0
JOHN F MANLEY LIFE TRUSTEE	0.20	X						0	0	0
LING Z MARKOVITZ LIFE TRUSTEE	0.10	X						0	0	0
R EDEN MARTIN LIFE TRUSTEE	0.10	X						0	0	0
ARTHUR C MARTINEZ LIFE TRUSTEE	0.10	X						0	0	0
JUDITH W MCCUE LIFE TRUSTEE	0.60	X						0	0	0
LESTER H MCKEEVER LIFE TRUSTEE	0.10	X						0	0	0
DAVID E MCNEEL LIFE TRUSTEE	0.40	X						0	0	0
NEWTON N MINOW LIFE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN D NICHOLS LIFE TRUSTEE	0.10	X						0	0	0
JAMES J O'CONNOR LIFE TRUSTEE	0.10	X						0	0	0
WILLIAM A OSBORN LIFE TRUSTEE	0.40	X						0	0	0
MRS ALBERT PAWLICK LIFE TRUSTEE	0.20	X						0	0	0
JANE DIRENZO PIGOTT LIFE TRUSTEE	0.40	X						0	0	0
JOHN M PRATT LIFE TRUSTEE	0.10	X						0	0	0
MRS NEIL K QUINN LIFE TRUSTEE	0.10	X						0	0	0
JOHN W ROGERS JR LIFE TRUSTEE	0.30	X						0	0	0
JERRY ROSE LIFE TRUSTEE	0.10	X						0	0	0
FRANK A ROSSI LIFE TRUSTEE	0.20	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CYNTHIA M SARGENT LIFE TRUSTEE	0.10	X						0	0	0
JOHN R SCHMIDT LIFE TRUSTEE	0.20	X						0	0	0
THOMAS C SHEFFIELD JR LIFE TRUSTEE	0.30	X						0	0	0
RITA SIMO LIFE TRUSTEE	0.10	X						0	0	0
ROBERT C SPOERRI LIFE TRUSTEE	0.10	X						0	0	0
CARL W STERN LIFE TRUSTEE	0.10	X						0	0	0
ROGER W STONE LIFE TRUSTEE	0.10	X						0	0	0
WILLIAM H STRONG LIFE TRUSTEE	0.10	X						0	0	0
LOUIS C SUDLER JR LIFE TRUSTEE	0.10	X						0	0	0
RICHARD L THOMAS LIFE TRUSTEE	0.20	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD P TOFT LIFE TRUSTEE	0.30	X						0	0	0
PENNY VAN HORN LIFE TRUSTEE	0.40	X						0	0	0
JOHN AALBREGTSE TRUSTEE	0.60	X						0	0	0
PETER J BARACK TRUSTEE	0.40	X						0	0	0
H RIGEL BARBER TRUSTEE	0.10	X						0	0	0
RANDY LAMM BERLIN TRUSTEE	0.10	X						0	0	0
LAURENCE O BOOTH TRUSTEE	0.10	X						0	0	0
LORI BRADLEY TRUSTEE	0.10	X						0	0	0
KAY BUCKSBAUM TRUSTEE	0.10	X						0	0	0
ROBERT J BUFORD TRUSTEE	0.50	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LESLIE HENNER BURNS TRUSTEE	0.50	X						0	0	0
DEBRA A CAFARO TRUSTEE	0.10	X						0	0	0
MARION A CAMERON TRUSTEE	0.10	X						0	0	0
GREGORY C CASE TRUSTEE	0.10	X						0	0	0
DAVID CASPER TRUSTEE	0.30	X						0	0	0
BRUCE E CLINTON TRUSTEE	0.20	X						0	0	0
GEORGE P COLIS TRUSTEE	0.30	X						0	0	0
KEITH S CROW TRUSTEE	0.10	X						0	0	0
DR CHRISTOPER I CULP TRUSTEE	0.20	X						0	0	0
STEPHEN V D'AMORE TRUSTEE	0.10	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TIMOTHY A DUFFY TRUSTEE	0.40	X						0	0	0
MIMI DUGINGER TRUSTEE	0.20	X						0	0	0
BRIAN W DUWE TRUSTEE	0.10	X						0	0	0
J BRADLEY FEWELL TRUSTEE	0.20	X						0	0	0
RICHARD C GODFREY TRUSTEE	0.10	X						0	0	0
GRAHAM C GRADY TRUSTEE	0.10	X						0	0	0
LORI JULIAN TRUSTEE	0.70	X						0	0	0
JARED KAPLAN TRUSTEE	0.50	X						0	0	0
GERALDINE KEEFE TRUSTEE	0.20	X						0	0	0
DONNA L KENDALL TRUSTEE	0.30	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES KOLAR TRUSTEE	0.10	X						0	0	0
JOSEPH A KONEN TRUSTEE	0.10	X						0	0	0
RANDALL S KROZNER TRUSTEE	0.20	X						0	0	0
JOSEF LAKONISHOK TRUSTEE	0.20	X						0	0	0
PATTY LANE TRUSTEE	0.10	X						0	0	0
BETH MANNINO TRUSTEE	0.20	X						0	0	0
MARK G MCGRATH TRUSTEE	0.40	X						0	0	0
CHRISTOPHER MELVIN TRUSTEE	0.20	X						0	0	0
RENEE METCALF TRUSTEE	0.30	X						0	0	0
MARY PIVIROTTA MURLEY TRUSTEE	0.20	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SYLVIA NEIL TRUSTEE	0.20	X						0	0	0
ELIZABETH PARKER TRUSTEE	0.20	X						0	0	0
GERALD PAULING TRUSTEE	0.50	X						0	0	0
JOSE LUIS PRADO TRUSTEE	0.10	X						0	0	0
DR IRWIN PRESS TRUSTEE	0.10	X						0	0	0
COL JENNIFER N PRITZKER TRUSTEE	0.10	X						0	0	0
DR MOHAN RAO TRUSTEE	0.30	X						0	0	0
BURTON X ROSENBERG TRUSTEE	0.30	X						0	0	0
KRISTEN C ROSSI TRUSTEE	0.30	X						0	0	0
EARL J RUSNAK JR TRUSTEE	0.70	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
E SCOTT SANTI TRUSTEE	0.10	X						0	0	0
STEVEN E SHEBIK TRUSTEE	0.80	X						0	0	0
ALEJANDRO SILVA TRUSTEE	0.30	X						0	0	0
MARLON SMITH TRUSTEE	0.10	X						0	0	0
WALTER SNODELL TRUSTEE	0.20	X						0	0	0
DANIEL E SULLIVAN JR TRUSTEE	0.20	X						0	0	0
SCOTT SWANSON TRUSTEE	0.20	X						0	0	0
NASRIN THIERER TRUSTEE	0.20	X						0	0	0
TERRENCE J TRUAX TRUSTEE	0.30	X						0	0	0
FREDERICK H WADDELL TRUSTEE	0.50	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PAUL R WIGGIN TRUSTEE	0.50	X						0	0	0
ROBERT A WISLOW TRUSTEE	0.10	X						0	0	0
STACIE M FRANK ASSISTANT TREASURER	40.00			X				260,557	0	18,946
DAVID CHAMBERS VP FOR DEVELOPMENT (UNTIL 10/12/18)	40.00			X				233,660	0	30,334
KAREN RAHN SECRETARY	40.00			X				74,496	0	16,684
VANESSA MOSS VP FOR OPERATIONS	40.00				X			243,332	0	41,797
RICCARDO MUTI MUSIC DIRECTOR	40.00					X		1,591,276	0	0
ROBERT CHEN CONCERTMASTER	40.00					X		515,753	0	57,945
JOHN SHARP PRINCIPAL CELLO	40.00					X		296,511	0	71,308
JAY K FRIEDMAN PRINCIPAL TROMBONE	40.00					X		292,000	0	71,049

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEPHEN WILLIAMSON PRINCIPAL CLARINET	40.00					X		296,752	0	52,114

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Employer identification number
36-2167823

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 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 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	35,119,674	30,408,215	23,567,693	35,070,114	30,805,974	154,971,670
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	35,119,674	30,408,215	23,567,693	35,070,114	30,805,974	154,971,670
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).						16,208,113
6 Public support. Subtract line 5 from line 4.						138,763,557

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7 Amounts from line 4.	35,119,674	30,408,215	23,567,693	35,070,114	30,805,974	154,971,670
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,980,963	5,076,230	4,655,238	4,978,476	6,161,973	25,852,880
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 VI.).						
11 Total support. Add lines 7 through 10						180,824,550

12 Gross receipts from related activities, etc. (see instructions) **12** 161,171,743

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) **14** 76.740 %

15 Public support percentage for 2017 Schedule A, Part II, line 14 **15** 74.280 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . .						
3	Gross receipts from activities that are not an unrelated trade or business under section 513 . . .						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge . . .						
6	Total. Add lines 1 through 5 . . .						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons . . .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. . .						
c	Add lines 7a and 7b. . .						
8	Public support. (Subtract line 7c from line 6.) . . .						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6. . .						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. . .						
c	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. . .						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . .						
13	Total support. (Add lines 9, 10c, 11, and 12.) . . .						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.** . . .

Section C. Computation of Public Support Percentage

15	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018:			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:

Software Version:

EIN: 36-2167823

Name: CHICAGO SYMPHONY ORCHESTRA

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018
Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization CHICAGO SYMPHONY ORCHESTRA	Employer identification number 36-2167823
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ _____

3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	0													
c	Total lobbying expenditures (add lines 1a and 1b)	0													
d	Other exempt purpose expenditures	78,697,891													
e	Total exempt purpose expenditures (add lines 1c and 1d)	78,697,891													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	0	0	0	0	
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2018
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of 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 advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization'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? . . . Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on 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? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- 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" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	314,587,000	304,786,000	287,993,000	303,606,000	305,453,000
b Contributions	10,500,000	2,843,000	812,000	9,411,000	6,867,000
c Net investment earnings, gains, and losses	12,801,000	21,643,000	30,436,000	-11,389,000	3,862,000
d Grants or scholarships					
e Other expenditures for facilities and programs	14,887,000	14,685,000	14,455,000	13,635,000	12,576,000
f Administrative expenses					
g End of year balance	323,051,000	314,587,000	304,786,000	287,993,000	303,606,000

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 46.040 %
 - b** Permanent endowment ▶ 43.220 %
 - c** Temporarily restricted endowment ▶ 10.740 %
- The percentages on 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:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		25,475,169		25,475,169
b Buildings		125,370,584	74,432,361	50,938,223
c Leasehold improvements		258,036	248,287	9,749
d Equipment		14,055,657	12,398,475	1,657,182
e Other		13,851,794	7,174,303	6,677,491
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				84,757,814

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) ALTERNATIVE INVESTMENTS - ABSOLUTE RETURN	30,313,322	F
(B) HEDGED EQUITIES	37,784,749	F
(C) PRIVATE EQUITY	27,773,852	F
(D) REAL ASSETS	9,729,388	F
(E) BENEFICIAL INTEREST IN TRUST AND OTHER	8,014,242	F
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	113,615,553	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
PENSION BENEFITS	52,244,977
OTHER LONG-TERM LIABILITIES	1,082,408
INTEREST RATE SWAP CONTRACTS	21,534,593
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	74,861,978

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	75,186,378
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	2,478,220
b	Donated services and use of facilities	2b	686,927
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	3,165,147
3	Subtract line 2e from line 1	3	72,021,231
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	1,335,025
b	Other (Describe in Part XIII.)	4b	-1,305,835
c	Add lines 4a and 4b	4c	29,190
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	72,050,421

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	99,509,098
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	686,927
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,305,835
e	Add lines 2a through 2d	2e	1,992,762
3	Subtract line 2e from line 1	3	97,516,336
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,335,025
b	Other (Describe in Part XIII.)	4b	-20,153,470
c	Add lines 4a and 4b	4c	-18,818,445
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	78,697,891

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:
Software Version:
EIN: 36-2167823
Name: CHICAGO SYMPHONY ORCHESTRA

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE INVESTMENT COMMITTEE, WHICH OVERSEES ALL THE CORPORATION'S INVESTMENTS, OPERATES UNDER INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS, WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. UNDER THESE POLICIES, THE ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT, OVER TIME, WILL MEET THE LONG-TERM OBJECTIVE OF A 5% REAL RETURN ON ASSETS. THE CORPORATION'S POLICY IS TO PRESERVE THE HISTORICAL DOLLAR VALUE OF PERMANENTLY RESTRICTED CONTRIBUTIONS, AND TO USE ANY OF THE INVESTMENT RETURNS AS IS PRUDENT CONSIDERING THE CORPORATION'S LONG- AND SHORT-TERM NEEDS, RESOURCES, DURATION AND PRESERVATION OF DONOR-RESTRICTED ENDOWMENT FUNDS, DONOR RESTRICTIONS, EXPECTED TOTAL RETURN ON ITS INVESTMENTS, PRICE LEVEL TRENDS, GENERAL ECONOMIC CONDITIONS, AND INVESTMENT POLICIES.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	<p>INCOME TAXES: THE CORPORATION FOLLOWS THE STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THE GUIDANCE, THE CORPORATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE CORPORATION, CONTINUED TAX EXEMPT STATUS OF BONDS PAYABLE, AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE CORPORATION FILES FORM 990 IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF ILLINOIS.</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSES (PART VIII, LINE 6B) -447,870. GAIN (LOSS) ON SALE OF OTHER ASSETS (PART V III, LINE 7C(II)) -16,108. FUNDRAISING EVENT EXPENSES (PART VIII, LINE 8B + LINE 9B) -651,184. COST OF GOODS SOLD (PART VIII, LINE 10B) -190,673.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES (PART VIII, LINE 6B) 447,870. (GAIN) LOSS ON SALE OF OTHER ASSETS (PART VI II, LINE 7C(II)) 16,108. FUNDRAISING EVENT EXPENSES (PART VIII, LINE 8B + LINE 9B) 651,184 . COST OF GOODS SOLD (PART VIII, LINE 10B) 190,673.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	INTEREST RATE SWAP FAIR VALUE ADJUSTMENT -5,386,852. CHANGE IN PENSION PLAN ASSETS AND BENEFIT OBLIGATIONS -14,766,618.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
3a Sub-total	0	2			66,134,505
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	2			66,134,505

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Additional Data

Software ID:

Software Version:

EIN: 36-2167823

Name: CHICAGO SYMPHONY ORCHESTRA

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	ALTERNATIVE INVESTMENTS (HEDGED EQUITY, ABSOLUTE RETURN AND PRIVATE EQUITY) IN THE CAYMAN ISLANDS.		62,305,888
EAST ASIA AND THE PACIFIC	0	2	PROGRAM SERVICES	THE CHICAGO SYMPHONY ORCHESTRA PERFORMED TWELVE CONCERTS IN FIVE ASIAN CITIES (TAIPEI, SHANGHAI, BEIJING, TOKYO AND OSAKA). THIS WAS THE ORCHESTRA'S NINTH TOUR TO ASIA AND THE 61ST INTERNATIONAL TOUR IN ITS HISTORY.	3,803,943

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING - PATRONS TOUR		24,674

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| <p>a <input checked="" type="checkbox"/> Mail solicitations</p> <p>b <input checked="" type="checkbox"/> Internet and email solicitations</p> <p>c <input checked="" type="checkbox"/> Phone solicitations</p> <p>d <input checked="" type="checkbox"/> In-person solicitations</p> | <p>e <input checked="" type="checkbox"/> Solicitation of non-government grants</p> <p>f <input checked="" type="checkbox"/> Solicitation of government grants</p> <p>g <input checked="" type="checkbox"/> Special fundraising events</p> |
|---|--|
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
DCM INC 261 WEST 35TH STREET SUITE 600 NEW YORK, NY 10001	TELEFUNDRAISING CAMPAIGNS	No		1,023,621	310,632	712,989
Total ▶				1,023,621	310,632	712,989

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

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a)Event #1	(b) Event #2	(c)Other events	(d)
		SYMPHONY BALL (event type)	CORPORATE NIGHT (event type)	7 (total number)	Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,296,969	1,051,427	150,305	2,498,701
	2 Less: Contributions	890,898	719,525	52,424	1,662,847
	3 Gross income (line 1 minus line 2)	406,071	331,902	97,881	835,854
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	20,250		5,379	25,629
	6 Rent/facility costs	8,288	12,432	2,004	22,724
	7 Food and beverages	195,866	65,562	74,048	335,476
	8 Entertainment	15,600	1,200	31,802	48,602
	9 Other direct expenses	135,026	25,945	57,782	218,753
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				651,184
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				184,670

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2 Yes									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a No	4b No								
	4c No									
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a No	5b No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a No	6b No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7 No									
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8 No									
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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

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

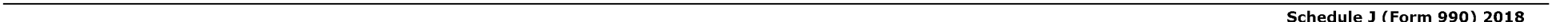
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JEFF ALEXANDER PRESIDENT	(i)	516,537	0	12,962	11,800	23,217	564,516	0
	(ii)	0	0	0	0	0	0	0
2 STACIE M FRANK ASSISTANT TREASURER	(i)	260,295	0	262	10,706	8,240	279,503	0
	(ii)	0	0	0	0	0	0	0
3 DAVID CHAMBERS VP FOR DEVELOPMENT (UNTIL 10/12/18)	(i)	233,322	0	338	10,175	20,159	263,994	0
	(ii)	0	0	0	0	0	0	0
4 VANESSA MOSS VP FOR OPERATIONS	(i)	242,261	0	1,071	13,882	27,915	285,129	0
	(ii)	0	0	0	0	0	0	0
5 RICCARDO MUTI MUSIC DIRECTOR	(i)	1,591,276	0	0	0	0	1,591,276	0
	(ii)	0	0	0	0	0	0	0
6 ROBERT CHEN CONCERTMASTER	(i)	514,970	0	783	20,471	37,474	573,698	0
	(ii)	0	0	0	0	0	0	0
7 JOHN SHARP PRINCIPAL CELLO	(i)	295,116	0	1,395	37,293	34,015	367,819	0
	(ii)	0	0	0	0	0	0	0
8 JAY K FRIEDMAN PRINCIPAL TROMBONE	(i)	288,925	0	3,075	43,334	27,715	363,049	0
	(ii)	0	0	0	0	0	0	0
9 STEPHEN WILLIAMSON PRINCIPAL CLARINET	(i)	296,003	0	749	16,540	35,574	348,866	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	CHARTER TRAVEL IS PROVIDED FOR ALL EMPLOYEES DURING CERTAIN FOREIGN AND DOMESTIC TOURS WHEN DEEMED MORE ECONOMICAL.



Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A ILLINOIS FINANCE AUTHORITY-PART II-COL A	86-1091967	45200FGY9	05-29-2008	83,015,000	SEE PART VI		X		X		X
B ILLINOIS FINANCE AUTHORITY-PART II-COL B	86-1091667	000000000	06-01-2018	46,100,000	SEE PART VI		X		X		X

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue		83,015,000		46,100,000				
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds		620,000						
6 Proceeds in refunding escrows		81,364,393						
7 Issuance costs from proceeds		722,487						
8 Credit enhancement from proceeds		308,120						
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds								
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	1997		1997					
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	X		X					
15 Were the bonds issued as part of an advance refunding issue?		X		X				
16 Has the final allocation of proceeds been made?	X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?								
2 Are there any lease arrangements that may result in private business use of bond-financed property?								

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?								
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?								
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?								
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?								
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?								

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X	X					
b Exception to rebate?	X		X					
c No rebate due?	X		X					
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X					
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X					

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
DATE REBATE COMPUTATION PERFORMED	ISSUER NAME: ILLINOIS FINANCE AUTHORITY-PART II-COL A DATE THE REBATE COMPUTATION WAS PERFORMED: 05/20/2013 ISSUER NAME: ILLINOIS FINANCE AUTHORITY-PART II-COL B DATE THE REBATE COMPUTATION WAS PERFORMED: 06/01/2018

Return Reference	Explanation
<p>SCHEDULE K SUPPLEMENTAL INFORMATION</p>	<p>PART I, LINE A, COLUMN (F): THE BONDS WERE ISSUED TO (I) REFINANCE A LINE OF CREDIT TO THE CHICAGO SYMPHONY ORCHESTRA (THE SYMPHONY) FROM THE NORTHERN TRUST COMPANY (THE LINE OF CREDIT) AND PAY OR REIMBURSE THE SYMPHONY FOR CERTAIN COSTS RELATING TO THE CONVERSION OF THE INTEREST RATE MODE (THE SERIES 2002 CONVERSION) ON THE \$80,650,000 ORIGINAL AGGREGATE PRINCIPAL AMOUNT OF THE ILLINOIS EDUCATIONAL FACILITIES AUTHORITY REVENUE REFUNDING BONDS, CHICAGO SYMPHONY ORCHESTRA, SERIES 2002 (THE SERIES 2002 BONDS) AND (II) PAY A PORTION OF THE INTEREST ON THE BONDS AND CERTAIN COSTS OF ISSUANCE OF THE BONDS (INCLUDING CREDIT ENHANCEMENT). THE PROCEEDS OF THE LINE OF CREDIT WERE USED TO FINANCE A PORTION OF THE COSTS OF (I) FINANCING THE MANDATORY PURCHASE OF THE SERIES 2002 BONDS BY THE SYMPHONY IN CONNECTION WITH THE SERIES 2002 CONVERSION, (II) PAYING CERTAIN COSTS AND EXPENSES RELATED TO (A) THE INCURRENCE AND MAINTENANCE OF THE LINE OF CREDIT, AND (B) THE SERIES 2002 CONVERSION, AND (III) PAYING ACCRUED INTEREST ON THE LINE OF CREDIT. THE SERIES 2002 BONDS WERE ISSUED ON DECEMBER 19, 2002 TO REFUND ALL OF THE \$77,900,000 ORIGINAL AGGREGATE PRINCIPAL AMOUNT OF THE ILLINOIS DEVELOPMENT FINANCE AUTHORITY VARIABLE/FIXED RATE DEMAND REVENUE BONDS, SERIES 1996 (CHICAGO SYMPHONY ORCHESTRA PROJECT) (THE SERIES 1996 BONDS), (II) PAY A PORTION OF INTEREST ON THE SERIES 2002 BONDS, AND (III) PAY A PORTION OF COSTS OF ISSUANCE (INCLUDING BOND INSURANCE PREMIUM). THE 1996 BONDS WERE ISSUED ON JUNE 12, 1996 TO (I) FINANCE, REFINANCE AND REIMBURSE THE SYMPHONY FOR CERTAIN COSTS RELATING TO THE RENOVATION AND EXPANSION OF ORCHESTRA HALL AND SURROUNDING PROPERTIES, (II) PAY A PORTION OF INTEREST ON THE SERIES 1996 BONDS, (III) PAY OR REIMBURSE THE SYMPHONY FOR A PORTION OF THE INTEREST ON THE \$50,000,000 ILLINOIS DEVELOPMENT FINANCE AUTHORITY VARIABLE/FIXED RATE DEMAND REVENUE BONDS, SERIES 1994 (CHICAGO SYMPHONY ORCHESTRA PROJECT), AND (IV) PAY CERTAIN COSTS RELATING TO LETTERS OF CREDIT AND COSTS OF ISSUANCE. SCHEDULE K, SUPPLEMENTAL INFORMATION: PART I, LINE B, COLUMN (F): THE BONDS WERE ISSUED TO CURRENTLY REFUND THE \$50,000,000 ORIGINAL AGGREGATE PRINCIPAL AMOUNT ILLINOIS DEVELOPMENT FINANCE AUTHORITY VARIABLE/FIXED RATE DEMAND REVENUE BONDS, SERIES 1994 (CHICAGO SYMPHONY ORCHESTRA PROJECT) (THE SERIES 1994 BONDS). THE SERIES 1994 BONDS WERE ISSUED ON JUNE 23, 1994. THE SERIES 1994 BONDS WERE ISSUED TO (I) FINANCE OR REIMBURSE A PORTION OF THE COSTS OF FACILITIES OF THE SYMPHONY (THE PRIOR PROJECT), (II) REFINANCE A LOAN MADE FROM THE NORTHERN TRUST COMPANY TO THE SYMPHONY FOR THE PURPOSE OF PAYING THE COSTS OF A FEASIBILITY STUDY RELATING TO THE PRIOR PROJECT AND FUNDING AN EARNEST MONEY DEPOSIT RELATING TO THE ACQUISITION OF CERTAIN REAL ESTATE ON WHICH A PORTION OF THE PRIOR PROJECT IS NOW LOCATED, (III) REFINANCE A LOAN MADE FROM THE NORTHERN TRUST COMPANY AND THE SANWA BANK, LIMITED, ACTING THROUGH ITS CHICAGO BRANCH, TO THE SYMPHONY FOR THE PURPOSE OF PA</p>

Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION	PAYING THE COSTS OF THE ACQUISITION OF REAL ESTATE (INCLUDING BUILDINGS LOCATED THEREON) ON WHICH A PORTION OF THE PRIOR PROJECT IS NOW LOCATED, (IV) FINANCE THE PAYMENT OF A PORTION OF THE INTEREST ON THE SERIES 1994 BONDS DURING THE PERIOD OF COMPLETION OF THE PRIOR PROJECT, (V) PAY CERTAIN COSTS RELATING TO THE ISSUANCE AND MAINTENANCE OF A CREDIT FACILITY DURING THE PERIOD OF COMPLETION OF THE PRIOR PROJECT AND (VI) PAY CERTAIN COSTS RELATING TO THE ISSUANCE OF THE SERIES 1994 BONDS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
CHICAGO SYMPHONY ORCHESTRA

Employer identification number
36-2167823

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	80	12,424,121	FMV - STOCK GIFTS
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AIRFARE MILES)	X	1	206,400	FAIR MARKET VALUE
26 Other ▶ (COUGH DROPS)	X	1	28,123	FAIR MARKET VALUE
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	LINE 9: THE NUMBER OF CONTRIBUTIONS FOR THE SECURITIES - PUBLICLY TRADED IS THE NUMBER OF STOCK GIFTS RECEIVED, NOT THE NUMBER OF DONORS OR SHARES CONTRIBUTED.
PART I, LINE 32B:	PUBLICLY TRADED SECURITIES ARE SOLD VIA A STOCK BROKERAGE ACCOUNT HELD AT THE CORPORATION'S PRIMARY BANKING RELATIONSHIP.

SCHEDULE O
(Form 990 or 990-EZ)**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.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization

CHICAGO SYMPHONY ORCHESTRA

Employer identification number

36-2167823

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BUSINESS RELATIONSHIP 1: DAVID P. HACKETT, BETH MANNINO BUSINESS RELATIONSHIP 2: ALEJANDRO SILVA, JOSE LUIS PRADO BUSINESS RELATIONSHIP 3: JAY L. HENDERSON, E. SCOTT SANTI BUSINESS RELATIONSHIP 4: RICHARD C. GODFREY, KEITH S. CROW BUSINESS RELATIONSHIP 5: DEBORA DE HOYO S, JOHN R. SCHMIDT BUSINESS RELATIONSHIP 6: FREDERICK A. KREHBIEL, DONALD G. LUBIN BUSINESS RELATIONSHIP 7: JAY L. HENDERSON, JOSE LUIS PRADO, FREDERICK H. WADDELL BUSINESS RELATIONSHIP 8: DEBRA A. CAFARO, SCOTT C. SWANSON BUSINESS RELATIONSHIP 9: GERALD L. PAULING II, BURTON X. ROSENBERG BUSINESS RELATIONSHIP 10: WALTER CARLSON (SPOUSE OF DEBORA DE HOYOS) CHARLES W. DOUGLAS, R. EDEN MARTIN, NEWTON N. MINOW

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERS OF THE CHICAGO SYMPHONY ORCHESTRA (THE "CORPORATION") ARE DESIGNATED AS GOVERNING MEMBERS. GOVERNING MEMBERS ARE ELECTED FROM AMONG PERSONS WHO HAVE DEMONSTRATED A SIGNIFICANT INTEREST IN THE CSO AND WHO MEET SUCH ADDITIONAL CRITERIA AS THE BOARD OF TRUSTEES MAY FROM TIME TO TIME DETERMINE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	GOVERNING MEMBERS RATIFY THE ELECTION OF GOVERNING MEMBERS AND, AT EACH ANNUAL MEETING, THE FULLY RATIFIED GOVERNING MEMBERS ELECT REGULAR AND LIFE TRUSTEES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	CSO STAFF PREPARES FORM 990, AND IT IS REVIEWED BY OUR TAX ADVISOR. STAFF AND THE TAX ADVISOR DISCUSS AND REVIEW THE ENTIRE FORM 990 AND FORM 990-T WITH MEMBERS OF THE CSO AUDIT COMMITTEE, WHO REVIEW AND ACCEPT IT BEFORE IT IS FILED AS SET FORTH IN THE COMMITTEE AUTHORITY AND RESPONSIBILITY SECTION OF THE AUDIT COMMITTEE CHARTER. AT ITS SPRING MEETING, THE BOARD OF TRUSTEES WAS REMINDED OF THE AUDIT COMMITTEE'S RESPONSIBILITY TO REVIEW AND APPROVE THE ANNUAL TAX RETURNS. THE 2018 FORM 990 AND FORM 990-T WERE REVIEWED AND APPROVED AT THE APRIL 28, 2020 MEETING OF THE AUDIT COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CSO MAINTAINS A CONFLICT OF INTEREST POLICY THAT APPLIES TO ALL TRUSTEES, THE EXECUTIVE COMMITTEES OF CERTAIN AUXILIARY OPERATIONS OPERATING UNDER THE CSO'S BYLAWS, SENIOR MANAGEMENT AND OTHER DESIGNATED STAFF MEMBERS, AND NON-TRUSTEE MEMBERS OF TRUSTEE COMMITTEES. THE POLICY REQUIRES EACH PERSON TO WHOM THE POLICY APPLIES TO COMPLETE AN ANNUAL DISCLOSURE QUESTIONNAIRE THAT DISCLOSES ANY BUSINESS OR FINANCIAL INTEREST, WHICH MIGHT REASONABLY BE EXPECTED TO GIVE RISE TO A POSSIBLE CONFLICT BETWEEN THE INTEREST OF THE CSO AND THE INTEREST OF SUCH PERSON. THE POLICY FORBIDS SUCH INDIVIDUALS FROM VOTING ON OR USING THEIR PERSONAL INFLUENCE IN CONNECTION WITH SUCH BUSINESS OR FINANCIAL ISSUES. IN THE EVENT THE CSO DOES CONDUCT BUSINESS WITH A RELATED PARTY, THE FINANCIAL TERMS OF THOSE RELATIONSHIPS ARE REPORTED ANNUALLY TO THE AUDIT COMMITTEE, WHOSE MEMBERS ARE INDEPENDENT PER THE TERMS OF ITS CHARTER. THE CSO REQUIRES EACH NON-UNION EMPLOYEE TO CONDUCT THEMSELVES IN ACCORDANCE WITH THE CODE OF BUSINESS CONDUCT AND ETHICS, APPROVED BY THE BOARD OF TRUSTEES, AND TO SIGN AN ANNUAL STATEMENT ACKNOWLEDGING THEIR UNDERSTANDING OF AND COMPLIANCE WITH THE CODE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE PRESIDENT INCLUDED A MEETING ON OCTOBER 1, 2018, OF THE HUMAN RESOURCES COMMITTEE, WHICH WAS COMPRISED OF FIVE INDEPENDENT TRUSTEES AND TWO NON-TRUSTEES. THE COMMITTEE REVIEWED THE COMPENSATION ARRANGEMENTS AND PEER BENCHMARK DATA BASED ON SIZE OF BUDGET AND SCOPE OF MANAGEMENT RESPONSIBILITY. PUBLISHED COMPENSATION SURVEYS FOR NON-PROFIT ORGANIZATIONS WERE ALSO REVIEWED. RECOMMENDATIONS WERE MADE TO THE COMMITTEE AND ACCEPTED, AND THE DELIBERATIONS OF THE COMMITTEE WERE DOCUMENTED IN THE MINUTES OF THE MEETING. THE PROCESS FOR DETERMINING THE COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES INCLUDED A MEETING ON OCTOBER 1, 2018, OF THE HUMAN RESOURCES COMMITTEE, WHICH WAS COMPRISED OF FIVE INDEPENDENT TRUSTEES AND TWO NON-TRUSTEES. THE COMMITTEE REVIEWED THE COMPENSATION ARRANGEMENTS AND PEER BENCHMARK DATA BASED ON SIZE OF BUDGET AND SCOPE OF MANAGEMENT RESPONSIBILITY. PUBLISHED COMPENSATION SURVEYS FOR NON-PROFIT ORGANIZATIONS WERE ALSO REVIEWED. RECOMMENDATIONS WERE MADE TO THE COMMITTEE AND ACCEPTED, AND THE DELIBERATIONS OF THE COMMITTEE WERE DOCUMENTED IN THE MINUTES OF THE MEETING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST PURSUANT TO THE GUIDELINES OF SECTION 6104(D).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	GUEST CONDUCTORS, ARTISTS AND COMPOSERS: PROGRAM SERVICE EXPENSES 6,254,111. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 1,771. TOTAL EXPENSES 6,255,882. OTHER CONTRACTED SERVICES: PROGRAM SERVICE EXPENSES 880,564. MANAGEMENT AND GENERAL EXPENSES 1,441,466. FUNDRAISING EXPENSES 20,511. TOTAL EXPENSES 2,342,541.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	INTEREST RATE SWAP FAIR VALUE ADJUSTMENTS -5,386,852. CHANGES IN PENSION PLAN ASSETS AND BENEFIT OBLIGATIONS -14,766,618.