		PHIC print - DO NOT PROCESS As Filed Data -		DLN: 9	3493237004142					
_ (990	Return of Organization Exempt From In	ncome T	ax c	DMBNo 1545-0047					
Form	530		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung							
Internal F	ent of the Tr Revenue Se	INICE The organization may have to use a copy of this return to satisfy sta	te reporting i	requirements	Open to Public Inspection					
		10 calendar year, or tax year beginning 09-01-2010 and ending 08-31-2011 C Name of organization C Name of organization		D Employer ide	entification number					
	eck if appl ress chan	ICADIE SAN FRANCISCO SYMPHONY		94-115628						
	ne change	Doing Business As								
	-			E Telephone nu	umber					
	ial return	Number and street (or P O box if mail is not delivered to street address) DAVIES SYMPHONY HALL 201 VAN NESS	Room/suite	(415)552-	8000					
	minated ended reti			G Gross receipts	\$ 97,699,666					
_	ended reti dication pe	SAN FRANCISCO, CA 941024585								
		F Name and address of principal officer	H(a) Is this a g	group return for affiliate	es ⁷ Ves V No					
		JOHN D GOLDMAN DAVIES SYMPHONY HALL 201 VAN NESS	U/b) Art - "	ffuntar metrid - 15						
		SAN FRANCISCO, CA 941024585	If "No	offiliates included? ," attach a list o exemption nun	(see instructions)					
I Tax	k-exempt	status 🔽 501(c)(3) 🔽 501(c) () ◄ (insert no) 🔽 4947(a)(1) or 🔽 527	п(с) втопр	, cxemption nun						
J We	ebsite: I	WWW SFSYMPHONY ORG								
K Form	n of orgar	nization 🔽 Corporation 🗍 Trust 🗍 Association 🗍 Other 🕨	L Year of for	nation 1910 M	State of legal domicile CA					
Pa	rt I	Summary								
Governance	2 Ch	eck this box 崎 if the organization discontinued its operations or disposed of	more than 25	i% of its net as	sets					
3	3 Nu	mber of voting members of the governing body (Part VI, line 1a)		3	80					
ttles &	4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)		4						
Ě	5 To	tal number of individuals employed in calendar year 2010 (Part V, line 2a) .			80					
Activ			•••	5	905					
		tal number of volunteers (estimate if necessary)		6	905 1,832					
	b Ne	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12		6 7a	905 1,832 83,730					
		tal number of volunteers (estimate if necessary)		6 7a 7b	905 1,832 83,730 77,759					
	8 (tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year	905 1,832 83,730 77,759 Current Year					
₽		tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year 30,887,903	905 1,832 83,730 77,759 Current Year 51,960,280					
venue	9	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year 30,887,903 24,375,879	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381					
Revenue	9 10]	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year 30,887,903	905 1,832 83,730 77,759 Current Year 51,960,280					
Revenue	9 1 10 1 11 (12	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year 30,887,903 24,375,879 5,594,862 -1,397,317	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918					
Revenue	9 1 10 1 11 (12 -	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597					
Revenue	9 1 10 1 11 0 12 1 13 0	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535					
	9 1 10 1 11 0 12 - 13 0 14 1 15 5	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597					
	9 10 11 12 12 13 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b Year 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0					
	9 1 10 1 11 0 12 - 13 0 14 1 15 - 16a 1	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0 36,754,090	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650					
Expenses Revenue	9 1 10 1 11 0 12	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Prior	6 7a 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0 36,754,090	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650					
	9 1 10 1 11 0 12 - 13 0 14 8 15 2 16a 8 b - 17 0 18 -	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12 tet unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6 7a 7b Year 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0 36,754,090 897,230 33,950,242 71,652,722	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650 469,352					
Expenses	9 1 10 1 11 0 12 - 13 0 14 8 15 2 16a 8 b - 17 0 18 -	tal number of volunteers (estimate if necessary)	Prior	6 7a 7b 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0 36,754,090 897,230 33,950,242 71,652,722 12,191,395	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650 469,352 32,101,798					
Expenses	9 9 10 1 11 0 12 - 13 0 14 1 15 2 16a 9 17 0 18 - 19 5	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12 it unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h)	Prior	6 7a 7b Year 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0 36,754,090 897,230 33,950,242 71,652,722	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650 469,352 32,101,798 72,154,335					
Expenses	9 1 10 1 11 0 12 - 13 0 14 1 15 2 16a 1 17 0 18 - 19 1 20 -	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12 it unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Prior	6 7a 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 59,461,327 59,461,327 51,160 0 36,754,090 897,230 71,652,722 12,191,395 of Current sar	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650 469,352 32,101,798 72,154,335 14,265,262 End of Year 306,759,580					
	9 9 10 1 11 0 12 - 13 0 14 8 15 - 16a 7 17 0 18 - 19 7 20 - 21 -	tal number of volunteers (estimate if necessary) tal unrelated business revenue from Part VIII, column (C), line 12 it unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h)	Prior	6 7a 7b 7b 7b 30,887,903 24,375,879 5,594,862 -1,397,317 59,461,327 51,160 0 36,754,090 897,230 33,950,242 71,652,722 12,191,395 of Current ear	905 1,832 83,730 77,759 Current Year 51,960,280 27,329,381 7,312,854 -182,918 86,419,597 41,535 0 39,541,650 469,352 32,101,798 72,154,335 14,265,262 End of Year					

Under penalties of perjury, I declare that I have examined this return, including acco knowledge and belief, it is true, correct, and complete. Declaration of preparer (othe knowledge.

Sign Here	****** Signature of officer JIM KIRK CFO Type or print name and title								
	Print/Type preparer's name MAGA KISRIEV	Preparer's signature	MAGA KISRIE						
Paid	Firm's name 🕨 BURR PILGER MAYER INC								
Preparer Use Only	F Firm's address 600 CALIFORNIA STREET SUITE 1300								
	SAN FRANCISCO, CA 94108								

May the IRS discuss this return with the preparer shown above? (see instructio

Form	990 (2010)				Page 2
Part		nt of Program Service chedule O contains a respons	Accomplishments se to any question in this Part III		ম
HO ME CO MM	SAN FRANCISCO E AND AROUND T	HE WORLD, ENRICHES, SE TAINS FINANCIAL STABIL	HEST POSSIBLE STANDARD FOR RVES, AND SHAPES CULTURAL L ITY AND GAINS PUBLIC RECOGN	IFE THROUGHOUT THE SPEC	TRUM OF BAY AREA
	the prior Form 99		program services during the year wi	hıch were not lısted on	es 🔽 No
3	Did the organizati services?		e sıgnıfıcant changes ın how ıt cond	ucts, any program •••••	es 🔽 No
	Section 501(c)(3) and 501(c)(4) organizations	r each of the organızatıon's three laı s and section 4947(a)(1) trusts are revenue, if any, for each program sei	required to report the amount o	
4a	(Code) (Expenses \$	60,644,759 including grants of \$	41,535) (Revenue \$	27,329,381)
	RESIDENTS AND VIS OTHERS THROUGHO AWARD WINNING SA MICHAEL TILSON TH SUBSCRIPTION SERI ADDITION, THE ORC PROVIDES AN EXTEN THERE IS ADVENTUF KIDS, REACHING NE CHILDREN, WWW SI MIDDLE AND HIGH S FREE TICKETS FOR BEFORE EACH CONC SEVERAL PROGRAMS CLASSICAL MUSIC M	ITORS OF EVERY ECONOMIC AND C DUT THE UNITED STATES AND ABRO AN FRANCISCO SYMPHONY IS REGA OMAS, THE SYMPHONY OFFERS EXI IES OTHER ANNUAL SERIES INCLUI HESTRA OFFERS FREE COMMUNIT ISIVE ARRAY OF MUSIC EDUCATION RES IN MUSIC, A COMPREHENSIVE FARLY 30,000 SCHOOL CHILDREN EA FSKIDS ORG, OFFERING YOUNGSTE SCHOOL MUSIC STUDENTS, THE HO HIGH SCHOOL AND COLLEGE MUSIC ETT OTHER PROGRAMS REACH EC S DISTRIBUTING DISCOUNTED AND	PROGRAMS, THE SAN FRANCISCO SYMPHO CULTURAL BACKGROUND IN OVER 200 CONC AD THROUGH TOURING, RECORDING, THE T RDED INTERNATIONALLY AS ONE OF THE FC CITING CLASSICAL PROGRAMS WITH INTERN DE THE GREAT PERFORMERS SERIES, MUSIC Y CONCERTS, AN ANNUAL SUMMER FESTIVA I PROGRAMS FOR YOUTH AND ADULTS, MOS MUSIC EDUCATION PROGRAM IN EVERY SAN ACH YEAR FROM AROUND THE GREATER BA ERS AROUND THE WORLD AN INTRODUCTION WARD SKINNER STUDENT FORUM, OFFERIN C STUDENTS FOR ADULTS, THE SYMPHONY COMPLIMENTARY TICKETS THE SYMPHONY L AGES AND BACKGROUNDS, INCLUDING A ERACTIVE WEBSITES	CERTS THE SYMPHONY ADDITIONALLY WEB, AND RADIO AND TELEVISION BRC REMOST AMERICAN ORCHESTRAS UN VATIONALLY ACCLAIMED GUEST ARTIST C FOR FAMILIES AND THE CHAMBER MU L AND DECEMBER HOLIDAY CONCERTS ST OF WHICH ARE FREE OF CHARGE F N FRANCISCO PUBLIC ELEMENTARY SC Y AREA OTHER PROGRAMS INCLUDE A N TO MUSIC, THE INSTRUMENT TRAIN. NG GREATLY DISCOUNTED TICKETS TO PRESENTS INSIDE MUSIC TALKS, WHIG ESIDENTS AND INCLUDE FREE OUTDOO "S WIDE-RANGING RECORDING AND M	RÉACHES MILLIONS OF DADCASTS THE GRAMMY DER MUSIC DIRECTOR 'S IN ITS 100+ CONCERT JSIC SERIES IN OR YOUNG CHILDREN, HOOL AND CONCERTS FOR A SPECIAL WEB SITE FOR ING PROGRAM FOR COLLEGE STUDENTS, AND CH ARE FREE OF CHARGE DR CONCERTS AND IEDIA PROJECTS MAKE
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		ervices (Describe in Schedu			
4d	(Expenses \$	•	ng grants of \$) (Revenue \$)

Part	IV Checklist of Required Schedules			
			Yes	No
	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A 😼	1	Yes	
2	is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🗐 . 🛛 .	2	Yes	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 💁	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 😨	4	Yes	
i	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part</i>	5		
I	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete</i> Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 😨	9		No
	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, /III, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI. 🗐	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of ts total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> . 🔀	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of	11c		No
d	ts total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> . Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .	11c		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
i	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 😨	12a	Yes	
	Nas the organization included in consolidated, independent audited financial statements for the tax year? If Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
.3	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the US? <i>If "Yes," complete Schedule F, Parts II and IV</i> .	15		No
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to ndividuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV</i> .	16		No
	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17	Yes	
•	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part / III , lines 1 c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	Yes	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
	f "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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Form **990** (2010)

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 😨	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \ldots .	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> " <i>Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If</i> " <i>Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔂	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 🕲 [Yes V No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔞	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19 ⁷ Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form **990** (2010)

Form	990 (2010)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	• •		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .			
_	1a 303	3		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
-	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i>			
	Statements filed for the calendar year ending with or within the year covered by this return 2a	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the	3-	Yes	
Ь	year?	3a 3b	Yes	
- 4а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30	Tes	
та	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country 🕨 🕒	_		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		N	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	,		
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
C		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? \cdot .	7 f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
-	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Ļ
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	-		
U	against amounts due or received from them)			
13-		12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
		L		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans	-		
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	l	No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Page 5

Form	990 (2010)			Page 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 71 a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or char O. See instructions. Check if Schedule O contains a response to any question in this Part VI			
<u> </u>	ction A. Governing Body and Management	· ·	•,	
30	ction A. Soverning body and Management		Yes	No
			103	
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 80			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was	_		No
F	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No
5 6	Does the organization have members or stockholders?	5 6	Yes	
0 7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the		1 63	
/4	governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
ке	venue Code.)		Yes	
102	Does the organization have local chapters, branches, or affiliates?	10a	res	No No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10a		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	100		
114	Thas the organization provided a copy of this form 550 to an members of its governing body before ning the form.	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	O ther officers or key employees of the organization	15b	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?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
\$ 0	ction C. Disclosure	100		
<u> </u>	List the States with which a copy of this Form 990 is required to be filed CA			
	· · · · · · · · · · · · · · · · · · ·			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			

19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of
	interest policy, and financial statements available to the public See Additional Data Table

(415)552-8000

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization JIM KIRK CFO DAVIES SYMPHONY HALL 201 VAN NESS SAN FRANCISCO, CA 941024585

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

Check if Schedule O contains a response to any question in this Part VII

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) (C) Average Position (check hours that apply)			(B) Average hours	ck al			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week (describe hours for related organizations in Schedule O)	Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	from the organızatıon (W- 2/1099-MISC)	organızatıon (W- 2/1099-MISC)	organization (W- 2/1099-MISC) (W- 2/1099	organızatıons (W- 2/1099-	compensation from the organization and related organizations
See Additional Data Table												
										Farme 000 (2010)		

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, a	and Highest Compensated Employees (continued)
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	(A) Name and Title	(B) Average hours		(ition that a			II		(D) Reportable compensation	(E) Reportable compensation		(F) Estima amount o	ited fother
		per week (describe hours for related organizations in Schedule O)	Institutional Trustee Individual trustee or director		Highest compensated emptoyee Key employee Officei Institutional Trustee		Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)		compens from t organızatı relatı organıza	:he on and ed	
See A	dditional Data Table												
											_		
					<u> </u>								
1b	Sub-Total												
	Total from continuation sheets						•	•	2 124 740		_		-20.254
	Total (add lines 1b and 1c)							•	3,124,740		0		530,354
2	Total number of individuals (incl \$100,000 in reportable compen	-					above) who	received more tha	n			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					ey e	mploy •	ee, o •	r highest compensa	ited employee	3		No
4	For any individual listed on line : organization and related organiz												

4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5

Section B. Independent Contractors

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ındıvıdual 🔒

5

1 Complete this table for your five highest compensated independent contractors that received more than

. . .

\$100,000 of compensation from the organization

.

.

.

(A) Name and business address	(B) Description of services	(C) Compensation			
MTT INC 1745 BROADWAY 18TH FLOOR NEW YORK, NY 10019	MUSIC DIRECTOR	2,412,662			
INDEPENDENT COMMUNICATIONS ASSOC INC 38 MILLER AVENUE PMB 289 MILL VALLEY, CA 94941	PRODUCTION MANAGEMENT	922,707			
SD&A TELESERVICES INC 5757 WEST CENTURY BLVD SUITE 300 LOS ANGELES, CA 90045	PROFESSIONAL FUNDRAISER	917,514			
ROBERT W FOUNTAIN INC 80 MISSOURI STREET SAN FRANCISCO, CA 94107	EVENT PRODUCTION	787,568			
TOUR ARTS 2829 BRIDGEWAY SUITE 205 SAUSALITO, CA 94965	TOURING SERVICES	725,839			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►27					

No

Form 9							Pa	ge 9	
Part	VII	I Statement of Reven	ue		(A)	(B)	(C)	(D)	
					Total revenue	Related or	Unrelated business		
						exempt function	revenue	excluded from	
						revenue		tax	
								under sections	
								512,	
								513, or 514	
its at	1a	Federated campaigns	1a					514	
Contributions, gifts, grants and other similar amounts	Ь	Membership dues	. 1b						
am, c	с	Fundraising events	1c	2,734,757					
iar İar	d	Related organizations	. 1d						
sins, sim	е	Government grants (contributions)	1e	818,386					
ler utio	f	All other contributions, gifts, grants	, and 1f	48,407,137					
et e	a	similar amounts not included above Noncash contributions included in li		4,885,106					
and	-	Total. Add lines 1a-1f			51,960,280				
				Business Code					
BILLE	2a								
Rev	Ь	CONCERT & RELATED REV SFS MEDIA			26,985,950 177,734	26,985,950 177,734			
l 6 e	c	VOLUNTEER COUNCIL		711130	165,697				
Serw	d								
Program Service Revenue	e								
чво,	f	All other program service re	venue						
_ <u>č</u>	g	Total. Add lines 2a-2f	<u></u>		27,329,381				
	3	Investment income (includin	- · ·		3,184,276		51 692	3,132,594	
	4	and other similar amounts) Income from investment of tax-ex			5,104,270		51,082	3,132,394	
	-	Royalties							
		[(ı) Real	(11) Personal					
		Gross Rents		32,048					
	_	Less rental expenses							
	-	Rental income or (loss)		32,048					
	d	Net rental income or (loss)		(u) O the n	32,048		32,048		
	7a	Gross amount	(1) Securities 13,025,803	(II) O ther					
		from sales of assets other							
	Ь	than inventory Less cost or	8,897,225						
		other basis and sales expenses							
		Gain or (loss)	4,128,578					4 120 570	
		Net gain or (loss)			4,128,578			4,128,578	
iue		(not including	ing exerce						
ver Le		\$2,734,757 of contributions reported on	line 1c)						
ů.		See Part IV, line 18							
Other Revenue	ь	Less direct expenses .	a b	732,241					
δ		Net income or (loss) from fu		1,749,700	-1,017,525			-	
	9a	Gross income from damind a	ctivities See Part IV, line 19 . a		<u> </u>			1,017,525	
		Less direct expenses .							
		Net income or (loss) from ga							
	10;	a Gross sales of inventory, les returns and allowances	s						
			a	1,080,505					
		Less cost of goods sold .		633,078	A A 7 A 7 7			147 437	
	C	Net income or (loss) from sa Miscellaneous Revenue		Business Code	447,427			447,427	
	11.	a FOOD & BEV FROM PATRO		812900	220,155			220,155	
	_	MISCELLANEOUS		900099	134,977			134,977	
		c							
	6	d All other revenue							
	e	Total. Add lines 11a-11d			355,132				
	12	Total revenue. See Instructi	ons						
			•		86,419,597	27,329,381	83,730	7,046,206	
					-		rm 990 (20	10)	•

	990 (2010)				Page 10
Part	IX Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21 $$	41,535	41,535		
2	Grants and other assistance to individuals in the U S See Part IV , line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,912,405	656,248	1,081,587	174,570
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	27,138,202	23,916,785	2,027,333	1,194,084
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,909,621	3,662,946	175,682	70,993
9	Other employee benefits	4,661,637	4,093,057	368,087	200,493
10	Payroll taxes	1,919,785	1,666,688	182,169	70,928
а	Fees for services (non-employees) Management				<u> </u>
b	Legal	27,767	15,109	12,658	
с	Accounting	193,975		193,975	
d	Lobbying	16,768	8,469	8,299	
е	Professional fundraising services See Part IV, line 17	469,352			469,352
f	Investment management fees	224,716		224,716	
g	Other	314,319	132,262	179,872	2,185
12	Advertising and promotion	1,502,111	1,291,295	18,691	192,125
13	Office expenses	1,603,333	984,327	369,242	249,764
14	Information technology	267,440	16,342	250,374	724
15	Royalties				
16	Occupancy	548,438	201,878	273,606	72,954
17	Travel	93,044	59,202	19,643	14,199
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,133,761	1,027,026	57,718	49,017
23	Insurance	435,847	95,379	340,468	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	CONCERT PRODUCTION	16,735,248	16,610,875	57,375	66,998
b	CONSULTING FEES	2,438,060	2,349,902	72,559	15,599
С	AMORTIZATION	2,380,416	2,379,252	647	517
d	DIR FNDRSNG/ENDOWMENT	1,814,691			1,814,691
e	CREDIT CARD FEES	636,612	460,223	8,293	168,096
f	All other expenses	1,735,252	975,959	110,883	648,410
25	Total functional expenses. Add lines 1 through 24f	72,154,335	60,644,759	6,033,877	5,475,699
26	Joint costs. Check here 🕨 🔽 If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation	0	-191,402	-386,960	578,362
				Fo	rm 990 (2010)

Part X Balance Sheet

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1,373,185	1	1,241,002
	2	Savings and temporary cash investments					2	
	3	Pledges and grants receivable, net				18,607,200	3	26,433,053
	4	Accounts receivable, net				620,877	4	2,756,226
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employee	es, and			
							5	
	6	Receivables from other disqualified persons (as defined under s	ectio	n 4958(f)(1)).			
		persons described in section $4958(c)(3)(B)$, and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employ	mploy	ers, and				
8		organizations (see instructions) Schedule L					6	
ĕ	-	Notes and loans receivable, net				1,387,377	7	1,966,757
Assets	7 8	Inventories for sale or use				397,774	7 8	755,433
-4	9					11,790,834	0 9	9,700,083
	9 10a	Prepaid expenses and deferred charges		1	• 3,640,077	11,790,004	9	3,700,000
		Part VI of Schedule D	10a		, ,	47.000.050		47.005.007
	b	Less accumulated depreciation	10b		5,644,210			17,995,867
	11	Investments—publicly traded securities				166,343,185		181,535,455
	12	Investments—other securities See Part IV, line 11	•	•		46,453,324	12	53,990,047
	13	Investments—program-related See Part IV, line 11 .					13	
	14	Intangible assets				40.054.005	14	40.005.057
	15	Other assets See Part IV, line 11				10,354,295		10,385,657
	16	Total assets. Add lines 1 through 15 (must equal line 34)	•••			274,408,304	16	306,759,580
	17	Accounts payable and accrued expenses .				3,821,106	17	4,532,218
	18	Grants payable					18	
	19	Deferred revenue				12,642,098		13,158,974
S	20	Tax-exempt bond liabilities					20	
tie	21	Escrow or custodial account liability Complete Part IV of Schedu		• •			21	
iabilities	22	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 Complete Part X of Schedule D	•			28,236,088	25	26,383,873
	26	Total liabilities. Add lines 17 through 25				44,699,292	26	44,075,065
ses		Organizations that follow SFAS 117, check here F 🔽 and comp through 29, and lines 33 and 34.	olete	lines 27				
anc	27	Unrestricted net assets				58,030,695	27	62,108,600
Ba	28	Temporarily restricted net assets				52,953,619	28	67,823,806
Ŗ	29	Permanently restricted net assets				118,724,698	29	132,752,109
Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ►	nd cor	nplete				
\$ 0	30	Capital stock or trust principal, or current funds					30	
set	31	Paıd-ın or capıtal surplus, or land, buildıng or equipment fund					31	
As.	32	Retained earnings, endowment, accumulated income, or other fu	Inds				32	
Net	33	Total net assets or fund balances				229,709,012	33	262,684,515
Z	34	Total liabilities and net assets/fund balances				274,408,304	34	306, 759, 580
								Form 990 (2010)

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Pa	rt XI Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI .			<u>ب</u> ا.	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		86,4	19,597
2	Total expenses (must equal Part IX, column (A), line 25)	2		72,1	.54,335
3	Revenue less expenses Subtract line 2 from line 1	3			265,262
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			209,012
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	10,240
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		262,6	84,515
Par	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			ম	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant? \ldots \ldots \ldots		2b	Yes	
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i on a separate basis, consolidated basis, or both	ssued			
	🔽 Separate basis 🔰 Consolidated basis 👘 Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the i audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	Зb		

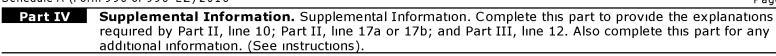
Form **990** (2010)

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		OULE A or 990EZ)		Public C	Charity S	Status ar	nd Publie	c Suppo	rt	ΟΜΕ	3 No 1545-0047		
Departr	nent of th	e Treasury		Complete if the o	-		01(c)(3) orga haritable tru		a section		ZUIU pen to Public		
				Attach to F	Form 990 or F	orm 990-EZ.	See separ	ate instructi			Inspection		
		ie organizat SCO SYMPHON							Employer i	dentificatio	n number		
_									94-11562				
	rt I			blic Charity Sta						structions			
	organı —			e foundation becaus									
1 2				on of churches, or as 1 in section 170(b)(1)(I)(A)(I).				
2				perative hospital se				n 170(b)(1)(∆)(iii)				
4	Ē			n organization operat						1)(A)(iii). F	nter the		
-	,			ty, and state	ieu ili eerijuii					_/(- /(/- =			
5	Γ	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	Г			local government or	-	al unit descr	ihad in sacti	on 170(b)(1)	$(\mathbf{A})(\mathbf{y})$				
7	ন			at normally receives						om the aene	eral public		
-	•	described			a babbtantia		apport nom	u goronnio		on the gene			
	_			A)(vi) (Complete P	-								
8				described in section									
9	I			at normally receives									
				ities related to its ex									
				oss investment inco janization after June						tax) from bu	sinesses		
10				ganized and operated									
11	, L	_		ganized and operated						o carry out t	he purposes of		
	,	one or mo the box th	re public	ly supported organize bes the type of supp b Type I	ations descri orting organi	ibed in section and c	on 509(a)(1)	or section 5 s 11e throug	09(a)(2) Se h11h	ee section 5			
e	Г	By checkı	ng this b	ox, I certify that the on managers and oth	organization	is not contro	olled directly	or indirectly	by one or m				
f		-	inization	received a written de	etermination	from the IRS	5 that it is a 1	Гуре I, Туре	II or Type I	II supportir	ng organization,		
g		check this Since Aug following p	just 17, 2	2006, has the organı	zatıon accep	ted any gift	or contributio	on from any c	ofthe		I		
				rectly or indirectly c	ontrols, eithe	er alone or to	gether with p	persons desc	rıbed ın (ıı)		Yes No		
		and (III) be	elow, the	governing body of th	e the suppor	ted organıza	tion?			11g	(i)		
		(ii) a famı	ly membe	er of a person descri	bed ın (ı) abo	ve?				11g((ii)		
				led entity of a perso						11g(iii)		
h		Provide th	ie followii	ng information about	the supporte	ed organızatı	on(s)						
				(iii)	(iv)								
	(i)			Type of organization	Is the		(∨) Did you not	ufv the	(vi) Is th				
	Name		(ii)	(described on	organızatı col (ı) lıst		organizati	-	organizat		(vii)		
	suppo		EIN	lines 1- 9 above	your gove		col (I) of	•	col (ı) org ın the U		A mount of support		
0	rganız	ation		or IRC section (see	docume	nt?	suppor	('	in the o	51			
				instructions))	Yes	No	Yes	No	Yes	No	1		
											1		
Tota	1			1						1			

For Paperwork Reduction Act Notice, see the Instructions for Form 990

	(A)(vi)	ule for Organiza					
		f you checked the the organization					
S	ection A. Public Support						
Cal	endar year (or fiscal year beginn	^{Ing} (a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	In) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	45,066,38	3 40,103,581	35,916,731	30,887,904	51,541,717	
2	Tax revenues levied for the organization's benefit and eithe paid to or expended on its behalf						
3	The value of services or facilitie furnished by a governmental un to the organization without charge	ıt					
4	Total. Add lines 1 through 3	45,066,38	3 40,103,581	35,916,731	30,887,904	51,541,717	203,516,316
5	The portion of total contribution by each person (other than a governmental unit or publicly supported organization) include on line 1 that exceeds 2% of th amount shown on line 11, colun (f)	d e					20,468,001
6	Public Support. Subtract line 5 from line 4						183,048,315
s	ection B. Total Support				I		
	endaryear (orfiscalyear	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	beginning in) 🕨 A mounts from line 4	45,066,383	40,103,581	35,916,731	30,887,904	51,541,717	203,516,316
8	Gross income from interest,	15,000,505	10,103,301	33,510,731	50,007,501	51,511,717	200,010,010
	dividends, payments received on securities loans, rents, royalties and income from similar sources	5,240,014	5,265,510	3,710,194	3,334,967	3,184,276	20,734,961
9	Net income from unrelated business activities, whether or not the business is regularly carried on			40,888	42,513	41,228	124,629
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	817,962	776,111	369,631	357,787	323,703	2,645,194
11	Total support (Add lines 7 through 10)						227,021,100
12	Gross receipts from related act	ivities, etc (See ins	tructions)			12	137,163,308
13	First Five Years If the Form 990 check this box and stop here) is for the organizat	ion's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) organ	nization, ▶
	ection C. Computation of						
14	Public Support Percentage for 2			11 column (f))		14	80 630 %
15	Public Support Percentage for 2		-			15	72 970 %
b	 33 1/3% support test—2010. If and stop here. The organization 33 1/3% support test—2009. If box and stop here. The organization 10%-facts-and-circumstances test 	qualifies as a public the organization dic ation qualifies as a p	cly supported orga I not check the bo publicly supported	anization x on line 13 or 16 organization	5a, and line 15 is	33 1/3% or more	
	is 10% or more, and if the orga in Part IV how the organization organization 10%-facts-and-circumstances t	nızatıon meets the " meets the "facts an	facts and cırcums d cırcumstances"	tances" test, che test The organiz	ck this box and s ation qualifies as	t op here. Explair a publicly suppo	
18	15 is 10% or more, and if the o Explain in Part IV how the orga supported organization Private Foundation If the organ instructions	rganızatıon meets th nızatıon meets the "	ne "facts and circu facts and circums	ımstances" test, tances" test The	check this box ar e organization qua	nd stop here. alıfıes as a public	^{Iy} ►Γ ►Γ
	-						

Sche	dule A (Form 990 or 990-EZ) 2010						Page 3
Pa	Support Schedule					с	
	(Complete only if you Part II. If the organiz						
Se	ction A. Public Support		uality under th	e lesis listed bi	elow, please co		
	ndar year (or fiscal year beginning	()))	(1) 2007	() 2000	(1) 2000	())))())	
	in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 70	Total. Add lines 1 through 5 Amounts included on lines 1, 2,		+	+			+
7a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support			1		1	
cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
Ь	Unrelated business taxable						
_	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
С 11	Add lines 10a and 10b Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gaın or loss from the sale of capıtal assets (Explaın ın Part						
	IV)						
13	Total support (Add lines 9, 10c,						
	11 and 12)						
14	First Five Years If the Form 990 is t	for the organization	on's first, second	i, third, fourth, or	fifth tax year as a	a section501(c)	(3) organization,
	check this box and stop here						F 1
Se	ction C. Computation of Pub	lic Support Po	ercentage				
15	Public Support Percentage for 2010			13 column (f))		15	
16	Public support percentage from 200	9 Schedule A, P	art III, lıne 15			16	
		·-··, ·	,				
Se	ction D. Computation of Inv	estment Inco	me Percenta	ae			
17	Investment income percentage for 1				ר (f))	17	
18	Investment income percentage from	•	.,	•		18	
	33 1/3% support tests—2010. If the				lune 15 ic more		d line 17 is not
тад	more than 33 1/3%, check this box					unan 35 1/3% ar	iu iiie 17 is not
	organization		genization q		.,		►
Ь	33 1/3% support tests—2009. If the						
20	18 is not more than 33 1/3%, check Private Foundation If the organization						tion P
		and not check	a box on me 14	, _ , _ , _ , _ , _ , _ , _ , _ , _ , _	er and box and s		- I



Schedule A (Form 990 or 990-EZ) 2010

Software ID: Software Version: EIN: 94-1156284 Name: SAN FRANCISCO SYMPHONY

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

(A) Name and Title	(B) A verage hours	Posi	(0	2) [cheo	ck a			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
JOHN D GOLDMAN BOARD PRESIDENT	30 00	х		х				0	0	0
MRS WILLIAM S FISHER BOARD VICE PRESIDENT	1 00	х		х				0	0	0
RICHARD M KOVACEVICH BOARD VICE PRESIDENT	3 00	х		х				0	0	0
JEREMIAH J SULLIVAN BOARD VICE PRESIDENT	3 00	х		x				0	0	0
ROBERT R TUFTS BOARD SECRETARY	3 0 0	х		х				0	0	0
CLAIRE N BARNES BOARD GOVERNOR	1 00	х						0	0	0
NANCY H BECHTLE BOARD GOVERNOR	1 00	х						0	0	0
LYDIA I BEEBE BOARD GOVERNOR	1 00	х						0	0	0
ATHENA T BLACKBURN BOARD GOVERNOR	1 00	х						0	0	0
ROBERT H BRANT BOARD GOVERNOR	2 00	х						0	0	0
BARBARA BROOKINS-SCHNEIDER BOARD GOVERNOR	2 00	х						0	0	0
CAROL FRANC BUCK BOARD GOVERNOR	1 00	х						0	0	0
MRS HERBERT E CAEN BOARD GOVERNOR	1 00	х						0	0	0
MRS LYMAN H CASEY BOARD GOVERNOR	1 00	х						0	0	0
JOHN S CHEN BOARD GOVERNOR	1 00	х						0	0	0
DR YANEK S Y CHIU BOARD GOVERNOR	1 00	х						0	0	0
MATT COHLER BOARD GOVERNOR	1 00	х						0	0	0
MARGARET LIU COLLINS BOARD GOVERNOR	1 00	х						0	0	0
NANCY R CONNER BOARD GOVERNOR	1 00	х						0	0	0
MICHELE CORASH BOARD GOVERNOR	1 00	х						0	0	0
MRS ROBERT A CORRIGAN BOARD GOVERNOR	1 00	х						0	0	0
COURTENAY CORRIGAN BOARD GOVERNOR	1 00	х						0	0	0
GAIL L COVINGTON BOARD GOVERNOR	1 00	х						0	0	0
RAY DOLBY BOARD GOVERNOR	1 00	х						0	0	0
DIXON R DOLL BOARD GOVERNOR	1 00	х						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) A verage hours	Posi	((tion (hat a	2) [cheo	ck a			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
PATRICIA C DUNN BOARD GOVERNOR	2 0 0	х						0	0	0
MARY C FALVEY	1 00	х						0	0	0
BOARD GOVERNOR MRS DONALD G FISHER		x						0	0	
BOARD GOVERNOR	1 0 0	~						0	0	
ELIZABETH J FOLGER BOARD GOVERNOR	1 00	х						0	0	0
A JOHN GAMBS BOARD GOVERNOR	2 00	х						0	0	0
CARLOS A GARCIA BOARD GOVERNOR	1 00	х						0	0	0
PRISCILLA B GEESLIN BOARD GOVERNOR	1 00	х						0	0	0
CHARLES M GESCHKE BOARD GOVERNOR	1 00	х						0	0	0
GORDON P GETTY BOARD GOVERNOR	1 00	х						0	0	0
ROBERT D GLYNN JR BOARD GOVERNOR	1 00	х						0	0	0
EMMA GOLTZ BOARD GOVERNOR	1 00	х						0	0	0
TED W HALL BOARD GOVERNOR	2 00	х						0	0	0
JOHN H HAMMERGREN BOARD GOVERNOR	2 00	х						0	0	0
ANETTE L HARRIS BOARD GOVERNOR	1 00	х						0	0	0
KENNETH L HIRSCH BOARD GOVERNOR	1 00	х						0	0	0
DAVID A HOYT BOARD GOVERNOR	1 00	х						0	0	0
GREGORY E JOHNSON BOARD GOVERNOR	1 00	х						0	0	0
JUDITH S JORGENSEN BOARD GOVERNOR	1 00	х						0	0	0
MARK A JUNG BOARD GOVERNOR	1 00	х						0	0	0
JUDI KANTER BOARD GOVERNOR	1 00	х						0	0	0
MRS WILLIAM R KIMBALL BOARD GOVERNOR	1 00	х						0	0	0
F CURT KIRSCHNER BOARD GOVERNOR	1 00	х						0	0	0
JANET W LAMKIN BOARD GOVERNOR	1 00	х						0	0	0
CHRISTINE E LAMOND BOARD GOVERNOR	1 00	х						0	0	0
MAX LEVCHIN BOARD GOVERNOR	1 00	х						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) A verage hours	Posi	(0) cheo	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
FRED M LEVIN BOARD GOVERNOR	1 00	х						0	0	0
MARYON DAVIES LEWIS BOARD GOVERNOR	1 0 0	х						0	0	0
RAYMOND KY LI BOARD GOVERNOR	1 00	х						0	0	0
GORRETTI LO LUI BOARD GOVERNOR	1 00	х						0	0	0
MARC T MACAULAY BOARD GOVERNOR	1 00	х						0	0	0
REBECCA MACIEIRA-KAUFMANN BOARD GOVERNOR	1 0 0	х						0	0	0
RICHARD B MADDEN BOARD GOVERNOR	2 0 0	х						0	0	0
MRS MERRILL L MAGOWAN BOARD GOVERNOR	1 0 0	х						0	0	0
EFF W MARTIN BOARD GOVERNOR	1 0 0	х						0	0	0
MRS J STANLEY MATTISON BOARD GOVERNOR	1 0 0	х						0	0	0
AMY S MCCOMBS BOARD GOVERNOR	2 0 0	х						0	0	0
NAN TUCKER MCEVOY BOARD GOVERNOR	1 0 0	х						0	0	0
KENNETH P MCNEELY BOARD GOVERNOR	1 0 0	х						0	0	0
WILLIAM F MEEHAN III BOARD GOVERNOR	1 0 0	х						0	0	0
ANTHONY W MILES BOARD GOVERNOR	1 0 0	х						0	0	0
J WILLIAM MORRIS III BOARD GOVERNOR	2 0 0	х						0	0	0
MRS WALTER S NEWMAN BOARD GOVERNOR	1 0 0	х						0	0	0
MRS JOHN F NICOLAI BOARD GOVERNOR	1 0 0	х						0	0	0
PAUL S OTELLINI BOARD GOVERNOR	1 0 0	х						0	0	0
MRS JAMES C PARAS BOARD GOVERNOR	1 0 0	х						0	0	0
LAURA K PFAFF BOARD GOVERNOR	1 0 0	х						0	0	0
PAULA B PRETLOW BOARD GOVERNOR	1 0 0	х						0	0	0
GEORGE R ROBERTS BOARD GOVERNOR	1 0 0	х						0	0	0
RICHARD M ROSENBERG BOARD GOVERNOR	2 0 0	х						0	0	0
SHARON L SETO BOARD GOVERNOR	1 0 0	х						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) A verage hours		((tion (hat a	che		11		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual titustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employiee	Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
MRS GEORGE P SHULTZ BOARD GOVERNOR	1 00	×						0	0	0
PATRICIA SUGHRUE SPRINCIN BOARD GOVERNOR	1 00	x						0	0	0
NICHOLAS E TOUSSAINT BOARD GOVERNOR	2 00	х						0	0	0
TONY TROUSSET BOARD GOVERNOR	1 00	х						0	0	0
ANITA L WORNICK BOARD GOVERNOR	1 00	х						0	0	0
BRENT ASSINK EXECUTIVE DIRECTOR	60 00			x				456,179	0	55,744
MARK KOENIG CFO (THROUGH 9/1/2010)	60 00			x				160,041	0	16,882
JAMES KIRK CFO (STARTED 10/25/2010)	60 00			x				38,666	0	1,376
JOHN KIESER GENERAL MANAGER	60 00				x			186,351	0	30,626
MARA FINERTY DIRECTOR, HUMAN RESOURCES	60 00				x			174,559	0	12,704
GREGG GLEASNER DIRECTOR, ARTISTIC PLANNING	60 00				x			185,537	0	28,911
NAN KEETON DIRECTOR, EXTERNAL AFFAIRS	60 00				x			267,316	0	27,852
ROBERT W LASHER DIR , DEVELOPMENT (THROUGH 10/1/2010)	60 00				x			335,061	0	19,054
ALEXANDER BARANTSCHIK CONCERTMASTER	60 00					x		440,081	0	66,982
NADYA TICHMAN ASSOC CONCERTMASTER	60 00					х		219,146	0	89,619
MARK INOUYE PRINCIPAL TRUMPET	60 00					х		235,845	0	19,143
WILLIAM BENNETT PRINCIPAL OBOE	60 00					x		207,959	0	82,924
ROBERT WARD PRINCIPAL HORN	60 00					х		217,999	0	78,537

efile GRAPHIC pr	int - DO NO	T PROCESS As Filed Data			93493237004142
SCHEDULE C		Political Campaign and	I Lobbying	Activities	OMBNo 1545-0047
Form 990 or 990-EZ)	For Organi	izations Exempt From Income Ta ▶ Complete if the organiza		• •	2010
epartment of the Treasury ternal Revenue Service		Attach to Form 990 or Form 990-			Open to Public Inspection
-	swered "Ye	s," to Form 990, Part IV, Line 3, or	Form 990-EZ, Pa	art V, line 46 (Political Can	npaign Activities),
1en Section 501(c)(3) ora	anizatione Co	mplete Parts I-A and B Do not complet	e Port I C		
		501(c)(3)) organizations Complete Par		/ Do not complete Part I-B	
Section 527 organizat		-		·	
-		s," to Form 990, Part IV, Line 4, or thave filed Form 5768 (election under			•
		have NOT filed Form 5768 (election under		•	•
		s," to Form 990, Part IV, Line 5 (Pr	,	<i>,,</i>	•
1 11 11 1		zations Complete Part III			
Name of the organization SAN FRANCISCO SYMPHON				Employer Ident	ification number
				94-1156284	
art I-A Complet	te if the or	ganization is exempt under	section 501(c) or is a section 527	organization.
1 Provide a descrip	otion of the org	ganızatıon's dırect and ındırect politic	cal campaıgn actı	vities in Part IV	
2 Political expendi	tures			► :	\$
3 Volunteer hours					
Part I-B Complet	te if the or	ganization is exempt under	section 501(c	:)(3).	
		e tax incurred by the organization und		•	\$
2 Enter the amount	t of any excise	e tax incurred by organization manag	ers under section	4955 🕨	\$
3 If the organizatio	on incurred a s	ection 4955 tax, did it file Form 472	0 for this year?		└ Yes └ No
4a Was a correction	made?				🗌 Yes 🗌 No
b If "Yes," describ	e in Part IV				
		ganization is exempt under	section 501(c) except section 501	(c)(3).
L Enter the amount	t directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$
		rganızatıon's funds contributed to ot	her organızatıons	for section 527	
exempt funtion a	ctivities			►	\$
3 Total exempt fun	ction expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	D-POL, line 17b 🕨	\$
4 Did the filing orga	anızatıon file F	Form 1120-POL for this year?			∏Yes ∏No
organization mad amount of politic	le payments F al contributior	nd employer identification number (El For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid froi irectly delivered t	m the filing organization's fu to a separate political organ	inds Also enter the nization, such as a
(a) Name		(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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 Cat No 50084S
 Schedule C (Form 990 or 990-EZ) 2010

Sc	hedule C (Form 990 or 990-EZ) 2010			Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	(election
	Check 🔽 If the filing organization belongs to a Check 🔽 If the filing organization checked bo	in affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobbyıng)		
с	Total lobbying expenditures (add lines 1a and 1)		
d	O ther exempt purpose expenditures			
e	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both		
	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 lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 47.	20 reporting	∏Yes ∏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 instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

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)).

	(election under section 501(h)).	(a)		(a)		
		Yes	No		Amoun	ıt.
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					
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
С	Media advertisements?		No			
d	Mailings to members, legislators, or the public?		No			
е	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?	Yes				1,701
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes			1	5,067
i	Other activities? If "Yes," describe in Part IV		No			
j	Total lines 1c through 1i				1	6,768
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
			,		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 carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	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				
		1 -				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

efile GRAPHIC p	rint - DO NOT PROCESS	As Filed Data -			<u>DLN: 9</u>	3493237	004142
CHEDULE D					c	OMBNo 15	45-0047
Form 990)	Supple	mental Financi	al Statements			201	
			ered "Yes," to Form 990	h		20	IV
partment of the Treasury	F	Part IV, line 6, 7, 8, 9, 1	0, 11, or 12.	,		Open to	
mal Revenue Service	•	to Form 990. 🕨 See se	parate instructions.			Inspec	
lame of the organi AN FRANCISCO SYMPH				Emp	loyer ident if i	cation numb	er
Part I Organi	inations Maintaining Day	. Aduined Funde	an Othan Cimilan C		1156284	- Comple	
	izations Maintaining Done ation answered "Yes" to For			unas	or Account	.s. Comple	ete ir the
9			r advised funds		(b) Funds and	other acco	unts
Total number at	t end of year						
	ributions to (during year)						
	ts from (durıng year)						
Aggregate valu	·						
funds are the o	ation inform all donors and dono rganization's property, subject to	o the organization's exc	clusive legal control?			∏ Yes	∏ No
used only for cl	ation inform all grantees, donors haritable purposes and not for th					∏ Yes	∏ No
	ermissible private benefit r vation Easements. Comp	late if the organizat	ion answered "Vec" +	o Forn	n QQA Dart	,	I NO
	onservation easements held by				1 990, Part	<u>iv, me 7.</u>	
	on of land for public use (e g , rea		Preservation of ar	n histor	ically importa	ntly land ar	ea
_	of natural habitat		Preservation of a	certifie	d historic stri	icture	
☐ Preservati	on of open space						
	2a–2d if the organization held a ne last day of the tax year	qualified conservation	contribution in the form	n of a co	onservation		
					Held at th	ne End of the	e Year
Total number o	f conservation easements			2a			
Total acreage r	restricted by conservation easer	nents		2b			
Number of cons	servation easements on a certific	ed historic structure in	cluded in (a)	2c			
Number of cons	servation easements included in	(c) acquired after 8/17	/06	2d			
Number of cons	servation easements modified, tr	ansferred, released, ex	tinguished, or terminate	ed by th	ne organizatio	n durıng	
the taxable yea	ar 🕨						
Number of stat	es where property subject to cor	iservation easement is	located 🕨				
	uzation have a written policy reg				violations, ai	nd	
	the conservation easements it h			2		∏ Yes	∏ No
	teer hours devoted to monitoring						
-	enses incurred in monitoring, ins				g the year 🕨 🕯		
	servation easement reported on) and 170(h)(4)(B)(11)?	line 2(d) above satisfy	the requirements of sec	ction		∏ Yes	∏ No
balance sheet,	scribe how the organization repo and include, if applicable, the te n's accounting for conservation o	xt of the footnote to the					
art IIII Organi	izations Maintaining Colle	ections of Art, His	torical Treasures, 90, Part IV, line 8.	or Ot	her Simila	Assets.	
If the organizat art, historical t	cion elected, as permitted under reasures, or other similar assets : XIV, the text of the footnote to	SFAS 116, not to repor held for public exhibit	t in its revenue stateme ion, education or resear	ch in fu			e,
historical treas	tion elected, as permitted under ures, or other similar assets hel owing amounts relating to these	d for public exhibition,					
(i) Revenues ir	ncluded in Form 990, Part VIII,	line 1			► \$		<u>15,0</u> 00
	uded in Form 990, Part X						
If the organizat	nts required to be reported under			or finan			
-	ided in Form 990, Part VIII, line	_			▶ ¢		
	d in Form 990, Part X	-			► \$		
 Assets include 	u 111 FUITH 990, Part X				- >		

		1
For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990	Cat No 52283D	Schedule D (Form 990) 2010

Part	Organizations Maintaining Co	llections of Art, H	listor	ical Tre	easu	res, or (Othe	r Similar	[.] Ass	ets (co	ntinued)
3	Using the organization's accession and other items (check all that apply)	records, check any o	f the fo	_		_			llection	on	
а	Public exhibition		d 厂	Loan oi	rexcl	nange prog	grams	i			
b	Scholarly research		e 🔽	Other	REPL	ICA FOR	ANN	UAL POST	ER		
с	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	llections and explain	how the	ey further	the o	rganızatıo	n's ex	kempt purp	ose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than t							nılar	Г	- Yes	ר No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					answer	ed "Y	'es" to For	rm 99	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermedia	ary for (contributi	ions c	r other as	sets	not	Г	- Yes	∏ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the fol	lowing	table							
									Amo	ount	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	1?						Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XIV										
Ра	rt V Endowment Funds. Complete	f the organization a	nswer	red "Yes	" to I	⁻ orm 990), Par				
		(a)Current Year	(b) Prio	r Year	(c)⊺	wo Years Ba	ick	(d) Three Ye Back	ars	(e) Four Y	ears Back
1a	Beginning of year balance	232,661,245	23	80,679,902		258,321	,438				
b	Contributions	20,521,288		6,872,990		16,791	,506				
с	Investment earnings or losses	24,946,947	1	.0,899,942		-25,359	,327				
d	Grants or scholarships										
e	Other expenditures for facilities and programs	16,004,445	1	.5,791,589		19,073	,715				
f	Administrative expenses										
g	End of year balance	262,125,035	23	82,661,245		230,679	,902				
2	Provide the estimated percentage of the yea	r end balance held as									
а	Board designated or quasi-endowment 🕨	32 000 %									
b	Permanent endowment 🕨 51 000 %										
с	Term endowment 🕨 17 000 %										
3a	Are there endowment funds not in the posses	sion of the organization	on that	are held	and a	dminister	ed for	the			
	organization by									Yes	No
	(i) unrelated organizations		• •	• •	• •	• •	• •		3a(i)	·	
Ŀ	(ii) related organizations				·	• • •	·		3a(ii	<u>)</u>	No
ь 4	Describe in Part XIV the intended uses of th	•			• •	• •	• •	• • •	3b		
	t VI Investments—Land, Buildings				0 P2	rt X line	<u>10</u>				
T G	Description of investment		(a) Cost or of Sis (investm	ther	(b)Cost or basis (oth	other	(c) Accumu depreciat		(d) Boo	ok value
1a	Land										
b	Buildings										
	Leasehold improvements					15,10	6,838	9,5:	14,516		5,592,322
d	Equipment					17,12	4,312		29,694		0,994,618
е	Other										1,408,927

Schedule D (Form 990) 2010

.

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) .

Schedule D (Form	990)	2010

17,995,867

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. . . Page **2**

Part VIII Investments-Other Securities. See	Form 990, Part X, line 12.	
 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation Cost or end-of-year market value
1)Financial derivatives		Cost of end-of-year market value
2)Closely-held equity interests		
3)Other		
A) LIMITED PARTNERSHIPS AND OTHER	53,990,047	
tal. (Column (b) should equal Form 990. Part X. col (B) line 12.)		
tal. (Column (b) should equal Form 990, Part X, col (B) line 12) 🕨		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
tal. (Column (b) should equal Form 990, Part X, col (B) line 13) 🕨		
art IX Other Assets. See Form 990, Part X, Irr		
(a) Descrip		(b) Book value
otal. (Column (b) should equal Form 990, Part X, col.(B) line 1	5)	
Part X Other Liabilities. See Form 990, Part X, col.(B) line 1		
(a) Description of Liability	(b) Amount	
ederal Income Taxes		
IABILITIES TO BENEFICIARIES OF SPLIT INTEREST		
GREEMENTS ENSION BENEFIT LIABILITIES	2,710,144 18,173,729	
LINGTON DENETTI LIADILITIES	10,1/29	

 Total. (Column (b) should equal Form 990, Part X, col (B) line 25)
 26,383,873

 2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

5,500,000

UNEARNED CHALLANGE GRANT

Sche	dule D (Form 990) 2010		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	86,419,597
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	72,154,335
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	14,265,262
4	Net unrealized gains (losses) on investments	4	17,870,169
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	840,071
9	Total adjustments (net) Add lines 4 - 8	9	18,710,240
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	32,975,502
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	ber R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	107,023,895
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	20,829,014
3	Subtract line 2e from line 1	3	86,194,881
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 224,716		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	224,716
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	86,419,597
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	74,888,463
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments	1	
с	Other losses	1	
d	Other (Describe in Part XIV)	1	
е	Add lines 2a through 2d	2e	2,958,845
3	Subtract line 2e from line 1	3	71,929,618
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 224,716		
b	Other (Describe in Part XIV)		
с	Add lines 4a and 4b	4 c	224,716
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	72,154,334
Pa	rt XIV Supplemental Information		

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

Identifier	Ret urn Reference	Explanation
	PART III, LINE 4	THE SYMPHONY RECEIVES A DONATED WATERCOLOR ON AN ANNUAL BASIS, WHICH IS CAPITALIZED AS PART OF IMPROVEMENTS, FURNITURE, AND EQUIPMENT THE DONATED WATERCOLOR IS BEING MAINTAINED AS PART OF THE SYMPHONY'S COLLECTION THE SYMPHONY MAINTAINS OTHER ARTWORK AROUND DAVIES SYMPHONY HALL, BUT NO OTHER ITEMS ARE RECORDED AS ASSETS
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	TO SUPPORT THE SYMPHONY'S PROGRAMS AND MAINTAIN FINANCIAL STABILITY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE SYMPHONY HAS EVALUATED ITS CURRENT TAX POSITIONS AND HAS CONCLUDED THAT AS OF AUGUST 31, 2011, THE SYMPHONY DOES NOT HAVE ANY SIGNIFICANT UNCERTAIN TAX POSITIONS FOR WHICH A RESERVE WOULD BE NECESSARY FOR STATE TAX PURPOSES, THE SYMPHONY IS GENERALLY NO LONGER SUBJECT TO TAX EXAMINATIONS FOR YEARS PRIOR TO 2007 FOR FEDERAL TAX PURPOSES, THE SYMPHONY IS NO LONGER SUBJECT TO TAX EXAMINATIONS FOR YEARS PRIOR TO 2008
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN PENSION BENEFIT LIABILITIES 840,071
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS EXPENSE LINE 8B, PART VIII, FORM 990 1,749,766 COST OF GOODS SOLD LINE 10B, PART VIII, FORM 990 633,078
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS EXPENSE LINE 8B, PART VIII, FORM 990 1,749,766 COST OF GOODS SOLD LINE 10B, PART VIII, FORM 990 633,078

efile GRAPHIC print - DO NOT PROCESS As Filed Data -					ta -	DLN:	93493237004142	
SCHEDULE F Statement				Activities (Dutside the Unit	ed States	OMBNo 1545-0047	
Departm	m 990) ent of the Treasury		► Complete i	if the organizatio Part IV, line h to Form 990. ►	990,	2010 Open to Public		
	Revenue Service					Employor idon	Inspection tification number	
	FRANCISCO SYM					94-1156284		
Pa	rt I General "Yes" to F	Information Form 990, Par	n on Activiti rt IV, lıne 14b	es Outside tl	ne United States. C	omplete if the organi	zation answered	
1 2	assistance, the the grants or as	grantees' elig ssistance?	Jubility for the	grants or assis	stance, and the select	amount of the grants ion criteria used to aw e of grant funds outside f	/ard FYes FNo	
	United States			·	Ū.			
3	Activites per Reg	uon (Use Part '	V if additional s	pace is needed)			
	(a) Regior		(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)		expenditures for region/investments in region	
	EUROPE (INCLU ICELAND & GRE		0	0	PROGRAM SERVICES	EUROPEAN TOURS	889,828	
•-			0	0			000.000	
Ь	Sub-total Total from contin to Part I		0	0			<u>889,828</u> 0	
C	Totals (add lines	3a and 3b)	0	0			889,828	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2010

_	nedule F (Form 99 ITT II Grants Part IV	and Other Assi	stance to Organ	nizations or Entiti eived more than \$5,	es Outside the Ur	nited States. Comp	plete if the organiza	tion answered "Yes'	Page 2 " to Form 990, ▶ □
_	Use Par	t V if additional s	pace is needed.		1	T	l	1	Г
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) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nu tax-exempt l	umber of recipien by the IRS, or for	t organizations lis which the grante	sted above that are se or counsel has pro	recognized as chari ovided a section 50	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as . 🕨	
3	Enter total nu	umber of other or	ganizations or er	itities					- F (Form 990) 2010
								Schedule F	(FOUII 390) 2010

Schedule F (Form 990) 2010

Page **3**

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method o valuation (book, FMV, appraisal, othe
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Schedule F (Form 990) 2010

Pa	art 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 (see instructions for Form 926)	ঘ	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Г	Yes	ম	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)	Г	Yes	ম	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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	ম	Yes	Г	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)	F	Yes	ম	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 file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ম	No

Schedule F (Form 990) 2010

Software ID: Software Version: EIN: 94-1156284 Name: SAN FRANCISCO SYMPHONY

Schedule F (Form 990) 2010

Page **5**

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

	DO NOT PROCESS	As Filed Data	a -	DLN:	93493237004142
SCHEDULE G (Form 990 or 990-EZ)	Fund	raising or C	rmation Regard Gaming Activitie	s	омв № 1545-0047 2010
Department of the Treasury nternal Revenue Service	or if the organ	ization entered more tl	es" to Form 990, Part IV, lines 1 han \$15,000 on Form 990-EZ, D-EZ. 🏲 See separate instructi	ine 6a.	Open to Public Inspection
Name of the organization SAN FRANCISCO SYMPHON	Y			Employer iden 94-1156284	tification number
Part I Fundraising A	ctivities. Complete	If the organizat	ion answered "Yes" t		, line 17.
 a	ons e a written or oral agree	f g ment with any ind		ernment grants g events rs, directors, trustees	
b If "Yes," list the ten high to be compensated at least			rs) pursuant to agreeme	nts under which the fun	idraiser is
 b If "Yes," list the ten high to be compensated at lease (i) Name and address of individual or entity (fundraiser) 		(iii) Did fundraiser have custody or control of contributions?	rs) pursuant to agreeme	nts under which the fun	idraiser is
to be compensated at lea (i) Name and address of individual or entity (fundraiser) D&A TELESERVICES INC 5757 W CENTURY BLVD SUITE 300	ast \$5,000 by the organ	(iii) Did fundraiser have custody or control of	rs) pursuant to agreeme D-EZ filers are not requi (iv) Gross receipts	ents under which the fun red to complete this tab (v) A mount paid to (or retained by) fundraiser listed in	(vi) A mount paid to (or retained by) organization
to be compensated at lea (i) Name and address of Individual	ast \$5,000 by the organ (ii) Activity CONSULT AND SOLICIT FOR	(iii) Did fundraiser have custody or control of contributions? Yes No	rs) pursuant to agreeme D-EZ filers are not requi (iv) Gross receipts from activity	ents under which the fun red to complete this tak (v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by)

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

Schedule	G (Form	990 or	990-EZ)	2010
	- (,	

Part IIFundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported
more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Page **2**

				erena mangreeeree	sipes greater than \$5,					
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through				
			OPENING GALA (event type)	(event type)	(total number)	col (c))				
ф										
Т.	1	Gross receipts	2,122,882	464,235	879,881	3,466,998				
Revenue	2	Less Charitable contributions	1,793,701	. 326,941	614,115	2,734,757				
	3	Gross income (line 1 minus line 2)	329,181	. 137,294	265,766	732,241				
	4	Cash prizes								
မာ	5	Non-cash prizes								
Expenses	6	Rent/facility costs	15,260	29,420	12,150	56,830				
	7	Food and beverages								
Direct	8	Entertainment								
Δ	9	Other direct expenses .	1,031,095	257,812	404,029	1,692,936				
	10	Direct expense summary Add lin				1,749,766				
	11	Net income summary Combine li	nes 3 and 10 in column (d)	🕨	-1,017,525				
Par	t II	I Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than				
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))				
-	1	Gross revenue								
nses		Cash prizes								
Expenses		Non-cash prizes								
ಕ್ಷ	4	Rent/facility costs								
ā	5	Other direct expenses								
	6	Volunteer labor	┌ Yes%_ ┌ No	└──Yes%_ └──No	│ Yes%_ │ No					
	7	Direct expense summary Add line	s 2 through 5 ın column (d)	🕨					
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)						
9		ter the state(s) in which the organiza								
a		the organization licensed to operate				• Yes No				
b	If"	No," Explain								
10a b		re any of the organization's gaming 'Yes," Explain				•• Yes No				
						J				
					Schedule G (Fo	rm 990 or 990-EZ) 2010				

11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г _{No}
12	Is the organization a grantor, bei	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
	formed to administer charitable g	jaming?		🔽 Yes 🔽 No
13	Indicate the percentage of gamin	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
14		f the person who prepares the organiza	tion's gaming/special events books	and
	records			
	Name 🕨			
	Address 🕨			
15a	Does the organization have a coi	ntract with a third party from whom the	organization receives gaming	
	-			Γγες ΓΝο
b		ning revenue received by the organizat		
		ied by the third party 🏲 \$		
с	If "Yes," enter name and address	5		
	Name 🕨			
	Address 🕨			
16	Gaming manager information			
	Name 🕨			
	Gaming manager compensation	▶ \$		
	Description of services provided	▶		
	-	F	F	
	Director/officer	Employee	Independent contractor	
17	Mandatory distributions	er state law to make charitable distribu	tions from the gaming proceeds to	
а				· · ΓΥες ΓΝο
h		required under state law distributed to		
5		activities during the tax year 🕨 \$	o other exempt organizations of spe	
Par	t IV Complete this part to p	provide additional information for	responses to question on Sche	dule G (see
	instructions.)			
	Identifier	ReturnReference	Explanat	ion

Schedule G (Form 990 or 990-EZ) 2010

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DL	N: 93493237004142
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	(Co		OMB No 1545-0047 2010 Open to Public Inspection				
Name of the organization SAN FRANCISCO SYMPHONY						Employer identi	fication number
	nation on Grants	and Assistance				94-1156284	
 Does the organization mathematical the selection criteria use Describe in Part IV the o Part II Grants and Othematical Form 990, Part 1 	Intain records to subs d to award the grants rganization's procedu ner Assistance to V, line 21 for any i	stantiate the amount of t or assistance?	e of grant funds in the Organizations in d more than \$5,000	United States the United States Check this box if r	s. Complete if the oi	ganization answere eived more than \$5,	d "Yes" to
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LOWELL HIGH SCHOOL 1101 EUCALYPTUS DRIVE SAN FRANCISCO,CA 94132	94-6000416	501(C)(3)		7,710	FM∨	TICKETS	TO PROVIDE THE COMMUNITY FREE ACCESS TO SELECT SYMPHONY PERFORMANCES
(2) PRESIDIO MIDDLE SCHOOL450 30TH AVENUE SAN FRANCISCO,CA 94121	94-6000416	501(C)(3)		33,825	FM∨	TICKETS	TO PROVIDE THE COMMUNITY FREE ACCESS TO SELECT SYMPHONY PERFORMANCES
2 Enter total number of sec3 Enter total number of other							2

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

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.								
Identifier	Return Reference	Explanation						
PROCEDURE FOR MONITORING GRANTS IN THE U S		SCHEDULE I, PART I, LINE 2 THE SYMPHONY DONATES TICKETS TO VARIOUS ORGANIZATIONS, PREDOMINANTLY RELATED TO EDUCATION SYMPHONY STAFF MEMBER(S) WORK DIRECTLY WITH THE SCHOOLS AND ATTEND CONCERTS TO PERSONALLY WELCOME THE TEACHERS AND STUDENTS WHO ARE ATTENDING THESE CONCERTS						

Schedule I (Form 990) 2010

efi	le GRAPHIC p	print - DO NOT PROCESS	s Filed Data -		DLN: 93	<u>49323</u>	7004	142
Schedule J		Com	pensation Info	ormation	OM	1B No 1	545-0	047
For	m 990)		Compensated Emplo	•	st	20	10)
								olic
	Revenue Service		Form 990. 🕨 See sepa			Inspe		n
	me of the organi FRANCISCO SYMPH				Employer ident if ica	tion nur	nber	
				9	94-1156284			
Ра	rt I Questi	ons Regarding Compensation	on					
							Yes	No
1a		ropiate box(es) if the organization pr Section A, line 1a Complete Part II						
		s or charter travel	·	lowance or residence for p	-			
		companions		for business use of persoi				
		ification and gross-up payments		ocial club dues or initiation				
	Discretion	ary spending account	Personal s	ervices (e g , maid, chaufi	feur, chef)			
b		exes in line 1a are checked, did the o						
		orprovision of all the expenses des				1b	Yes	
2		ation require substantiation prior to ors, trustees, and the CEO/Executiv						
	onicers, directo	sis, indices, and the CLO/Executiv	e Director, regarding		- 10.	2	Yes	
2	Tudiosta which			the componentian of the				
3		, if any, of the following the organizat CEO /Executive Director Check all		i the compensation of the				
		ition committee		ployment contract				
	☐ Independe	ent compensation consultant	🔽 Compensa	tion survey or study				
	🔽 Form 990	of other organizations	🔽 Approval b	y the board or compensat	ion committee			
4	During the yea or a related org	r, dıd any person lısted ın Form 990 ganızatıon	, Part VII, Section A,	line 1a with respect to th	ie filing organizatio	n		
а	Receive a seve	erance payment or change-of-contro	I payment from the o	rganızatıon or a related or	ganization?	4a		No
b	Participate in,	or receive payment from, a supplem	ental nonqualified ret	rement plan?		4b	Yes	
с	Participate in,	or receive payment from, an equity-	based compensation	arrangement?		4 c		No
	If "Yes" to any	of lines 4a-c, list the persons and p	provide the applicable	amounts for each item ir	ı Part III			
				_				
5) and 501(c)(4) organizations only n ted in form 990, Part VII, Section A	=					
5		contingent on the revenues of	, fille 14, did the orga	anization pay of accrue ar	, y			
а	The organization	on?				5a	Yes	
b	Any related org					5b		No
		e 5a or 5b, describe in Part III						
6		ted in form 990, Part VII, Section A contingent on the net earnings of	, line 1a, did the orga	anization pay or accrue ar	ıy			
а	The organization	2n?				6a		No
b	Any related or	janization?				6b		No
	If "Yes," to line	e 6a or 6b, describe in Part III						
7		ted in Form 990, Part VII, Section / described in lines 5 and 6? If "Yes,"		anızatıon provıde any non	ı-fıxed	7	Yes	
8		Ints reported in Form 990, Part VII, Initial contract exception described				8		No
9	If "Yes" to line	8, did the organization also follow t	he rebuttable presum	ption procedure described	d in Regulations	۴,		
-	section 53 495		ne reputtuble presum		a in regulations	9		

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 50053T

Schedule J (Form 990) 2010

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)		
(1) BRENT ASSINK	(I) (II)	449,726 0	0 0	6,453 0	38,758 0	16,986 0	511,923 0	0 0	
(2) MARK KOENIG	(I) (II)	156,196 0	0 0	3,845 0	7,240 0	9,642 0	176,923 0	0	
(3) JOHN KIESER	(I) (II)	186,222 0	0 0	129 0	29,904 0	722 0	216,977 0	0	
(4) MARA FINERTY	(I) (II)	174,490 0	0 0	69 0	6,854 0	5,850 0	187,263 0	0	
(5) GREGG GLEASNER	(I) (II)	185,288 0	0	249 0	21,042 0	7,869 0	214,448 0	0 0	
(6) NAN KEETON	(I) (II)	2 5 6 ,0 6 9 0	0	11,247 0	2,624 0	25,228 0	295,168 0	0 0	
(7) ROBERT W LASHER	(I) (II)	2 2 5 ,0 3 6 0	110,000	25 0	9,726 0	9,328, 9 0	354,115	0 0	
(8) ALEXANDER BARANTSCHIK	(1) (11)	4 3 9 ,5 6 5 0	0	516 0	34,222 0	32,760 0	507,063 0	0 0	
(9) NADYA TICHMAN	(I) (II)	218,870 0	0	276 0	56,859 0	32,760 0	308,765 0	0	
(10) MARK INOUYE	(I) (II)	2 3 5 ,7 3 7 0	0	108 0	9,993 0	9,150 0	254,988 0	0	
(11) WILLIAM BENNETT	(I) (II)	2 0 7 ,6 8 3 0	0	276 0	50,664 0	32,260 0	290,883 0	0 0	
(12) ROBERT WARD	(I) (II)	217,483 0	0	516 0	64,728 0	13,809 0	296,536 0	0 0	
(13)									
(14)									
(15)									
(16)									

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Ret urn Reference	Explanation
	PART I, LINE 1A	NAN KEETON, DIRECTOR OF EXTERNAL AFFAIRS, RECEIVED A GROSS-UP PAYMENT OF \$3,702 DURING THE YEAR
	,	BRENT ASSINK, EXECUTIVE DIRECTOR, PARTICIPATES IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN SFS CONTRIBUTED \$16,500 TO THE PLAN IN 2010
	,	ROBERT W LASHER, DIRECTOR OF DEVELOPMENT, RECEIVED \$100,000 INCENTIVE COMPENSATION BASED ON ACHIEVEMENT OF CAPITAL CAMPAIGN GOALS
		THE DIRECTOR OF DEVELOPMENT RECEIVED \$10,000 RELATED TO ADDITIONAL RESPONSIBILITIES ASSUMED DURING THE YEAR THE DIRECTOR OF EXTERNAL AFFAIRS RECEIVED \$ 11,702 INCLUDING \$3,702 DESCRIBED IN LINE 1 IN LIEU OF A CONTRIBUTION TO A RETIREMENT PLAN

Schedule J (Form 990) 2010

efile GRAPHIC pr	int - DO NC	ot pro	CESS	S As File	ed Data	a -			D	LN: 93	4932370	04142	
Schedule L		Т	ransa	actions v	with I	nterested F	Perso	ns		٥M	IB No 154	5-0047	
(Form 990 or 990-EZ)		"Yes") on Form	▶ Complete if the organization answered Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 25 or Form 990-EZ, Part V lines 38a or 40b.							2010		
Department of the Treasury nternal Revenue Service		Attach to Form 990 or Form 990-EZ. See separate instruct									Open to F Inspect		
Name of the organiza SAN FRANCISCO SYMPHO								E	mployer i	lent if ica	tion numbe	er	
SAN FRANCISCO STMPHO	IN T							9	4-11562	84			
						and section 501 Part IV, line 25a					ne 40b		
	Name of disq	uslufied	n a ra a n			(1) -		<i>.</i>			Gar	(c)	
1 (a)	ivame of disqu	uanneu	person			(b) Desc	ription	oftrans	action		Yes	rected?	
											163		
 2 Enter the amoun section 4958. 3 Enter the amoun Part II Loans to the section of the s		, on line	2,abo	ove, reimburs	ed by th			•••	🕨	\$ \$			
						, Part IV, line 26	, or Fori	m 990-E	EZ, Part V	, line 38	а		
(a) Name of intereste purpose	d person and	or fro	oan to m the zation?	(c) Orig principal a		(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?		
		То	From				Yes	No	Yes	No	Yes	No	
									_		_		
Total					▶ \$								
	or Assistar					Persons. rm 990, Part IV	/ line î	70					
(a) Name of in				b) Relationsh	up betwe	en interested per ganization	-		nount of g	rant or ty	pe of assis	stance	
						ganzation							
			1				1						

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

Complete if the organization			ie 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the transaction		(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
· · /	BOARD MEMBER IS A GENERAL PARTNER IN A LIMITED PARTNERSHIP		SEE SCH O - THE SYMPHONY INVESTED IN A LIMITED PARTNERSHIP IN WHICH A BOARD MEMBER IS A GENERAL PARTNER FUTURE CAPITAL COMMITMENTS RELATED TO THESE PARTNERSHIPS AS OF 8/31/2011 WAS \$3,299,693		No

Part V

Supplemental Information

Part IV Business Transactions Involving Interested Persons

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

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC	print - DO NOT	PROCESS	As Filed Data -		DLN:	9349323	7004	142
SCHEDULE M Form 990)		N	onCash Contr	ibutions		OMBNo 1		
Porm 990) Department of the Treasury Internal Revenue Service	•		if the organization and 990, Part IV, lines 2 ► Attach to Form		20 Open to Inspe	o Pub	olic	
ame of the organiz					Employer ident	fication nu	mber	
N FRANCISCO SYMPH	ONY				94-1156284			
Part I Types	s of Property				<u> </u>			
		(a) Check ıf applıcable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of determ amounts	(d) Ining oncash c	ontribut	ion
1 Art—Works of a	art	Х	1	15,000	FM∨			
2 Art—Historical	treasures							
3 Art—Fractional								
Books and pub								
5 Clothing and hi	ousehold	x		293,562	ANNUAL SALE	SREVENU	Е	
6 Cars and other								
7 Boats and plan	ies							
B Intellectual pro	operty							
9 Securities—Pu	•	X	92	4,146,385	FM∨			
0 Securities—Clo stock	· • • •							
L Securities—Pa LLC, or trust in 2 Securities—Mis	nterests .							
3 Qualified const contribution—I	ervation Historic							
structures . Qualified const contribution—(ervation							
5 Real estate—R	esidential .							
5 Real estate—C								
7 Real estate—O								
B Collectibles								
 Food inventory Drugs and med 								
1 Taxıdermy								
2 Historical artif								
B Scientific spec	imens							
Archeological	artıfacts .							
Other►(<u>FOO</u>		X	215	264,832				
5 Other►(<u>SOF</u>		X	1	17,783	IFM∨			
LEAS 7 Other⊫(<u>IMPR</u>	SEHOLD Rovements)	x	2	69,000	FMV			
B Other⊫(EQU:		X	3	78,544				
9 Number of For	ms 8283 received l		nızatıon durıng the tax yea 283, Part IV, Donee Ackn	ar for contributions	29			
			·				Yes	No
must hold for a		from the da	ate of the initial contribution	rty reported in Part I, lines on, and which is not require		· 30a		No
b If"Yes," desc	ribe the arrangemer	nt in Part II						
1 Does the orga	inization have a gift	acceptance	e policy that requires the i	review of any non-standard		31	Yes	
contributions?	· · · · ·		-	to solicit, process, or sell	non-cash ••••	. <u>32</u> a		No
 b If "Yes," desc 3 If the organiza 		evenues in	column (c) for a type of p	roperty for which column (a) is checked,			

describe in Part II
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 512273

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -		DLN: 93493237004142
SCHEDULE O (Form 990 or 990-EZ)	омв № 1545-0047 2010			
Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990 or 990-EZ.				Open to Public Inspection
Name of the organization SAN FRANCISCO SYMPHONY			Employe 94-115	r identification number

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		TWO MEMBERS OF THE BOARD ARE RELATED BY MARRIAGE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE BY LAWS STATE THAT ANY ONE DONATING OVER A DOLLAR AMOUNT OF \$350 AND HAS SUBSCRIBED TO AT LEAST THREE CONCERTS IS A MEMBER AND HAS THE RIGHT TO VOTE AT THE ANNUAL MEETING

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		EACH PERSON OR ENTITY WHO OR WHICH HAS SUBSCRIBED TO AT LEAST THREE CONCERTS IN ANY REGULAR SEASON SY MPHONY SERIES AND HAS CONTRIBUTED AT LEAST \$350 TO THE CORPORATION DURING A PERIOD OF 12 MONTHS ENDING UPON THE 60TH DAY BEFORE THE ANNUAL MEETING SHALL BE A VOTING MEMBER THE VOTING MEMBERS, AT EACH OF THEIR ANNUAL MEETINGS, SHALL ELECT APPROXIMATELY ONE-THIRD OF THE TOTAL NUMBER OF GOVERNORS, ROUNDED TO SUCH NEAREST WHOLE NUMBER AS DETERMINED BY THE BOARD OF GOVERNORS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		ON BEHALF OF THE BOARD OF GOVERNORS, THE AUDIT COMMITTEE SHALL HAVE THE RESPONSIBILITY TO REVIEW THE SYMPHONY'S FORM 990 BEFORE FILING WITH THE INTERNAL REVENUE SERVICE. THE COMMITTEE IS PROVIDED WITH A COMPLETE COPY OF THE FILING, INCLUDING ALL SUPPORTING SCHEDULES AND ATTACHMENTS A MEETING OF THE AUDIT COMMITTEE (ETHER IN PERSON OR VIA ELECTRONIC MEANS) SHALL BE HELD TO REVIEW THE 990 FORM WITH MANAGEMENT AND/OR THE PREPARERS ALL QUESTIONS, COMMENTS AND SUGGESTED REVISIONS SET FORTH BY THE AUDIT COMMITTEE WILL BE DOCUMENTED ALONG WITH THE RESPONSES, IF APPLICABLE AND THE FILING UPDATED OR REVISED AS NECESSARY

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE SYMPHONY'S CONFLICT OF INTEREST POLICY COVERS GOVERNORS, OFFICERS, EMPLOYEES AND VOLUNTEERS OF THE SAN FRANCISCO SYMPHONY THE POLICY IS REVIEWED ANNUALLY BY THE COMMITTEE ON GOVERNORS OF THE BOARD OF GOVERNORS, WHO SHALL HAVE FINAL AUTHORITY TO DETERMINE WHAT MAY BE A CONFLICT OF INTEREST AND HOW TO ADDRESS THE CONFLICT EACH GOVERNOR, COMMITTEE MEMBER, OFFICER AND KEY EMPLOYEE IS REQUIRED TO ANNUALLY COMPLETE A DISCLOSURE FORM IDENTIFY ING CONFLICTS OF INTEREST ONCE IDENTIFIED, CONFLICTS OF INTEREST ARE ADDRESSED AS ESTABLISHED IN THE SYMPHONY'S CONFLICT OF INTEREST POLICY THE CHIEF FINANCIAL OFFICER OF THE SYMPHONY MAINTAINS THE DISCLOSURE FORMS AND INSURES COMPLIANCE OF THE ESTABLISHED POLICY GENERALLY, A CONFLICTED PARTY MAY NOT PARTICIPATE IN ANY DISCUSSIONS OR DECISIONS ON MATTERS WHERE THEY MAY BE CONFLICTED THE CONFLICTED PARTY IS REQUIRED TO DISCLOSE ANY CONFLICTS OR POTENTIAL CONFLICTS ON THE MATTER BEING CONSIDERED

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE ADMINISTRATIVE COMPENSATION COMMITTEE (COMMITTEE) OF THE BOARD OF GOVERNORS DETERMINES THE COMPENSATION PACKAGE OF THE EXECUTIVE DIRECTOR (ED) AND THE CHIEF FINANCIAL OFFICER (CFO) OF THE SY MPHONY THE COMMITTEE WILL MEET ANNUALLY TO REVIEW AND APPROVE THE COMPENSATION AND BENEFIT PACKAGES FOR THE ED AND CFO THE COMMITTEE RELIES ON COMPARABILITY DATA PREPARED BY THE DIRECTOR OF HUMAN RESOURCES FOR THE SAME OR SIMILAR POSITIONS IN COMPARABLE ORCHESTRAS IN THE UNITED STATES AND SIMILAR POSITIONS FOR NON-PROFITS IN THE SAN FRANCISCO BAY AREA THE ED AND CFO ARE NOT PRESENT FOR ANY DELIBERATIONS OF THE COMMITTEE NOR DO THEY HAVE ACCESS TO THE INFORMATION PRESENTED TO THE COMMITTEE BY THE DIRECTOR OF HUMAN RESOURCES DURING THE FISCAL YEAR BEING REPORTED, THE COMMITTEE REVIEWED THE COMPENSATION PACKAGES ON 9/27/2010

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE REQUIRED ORGANIZATIONAL DOCUMENTS OF THE SY MPHONY WILL BE AVAILABLE (FOR INSPECTION OR COPYING) AT DAVIES SY MPHONY HALL DURING NORMAL BUSINESS HOURS AT NO CHARGE. THE PUBLIC INSPECTION COPY OF THE SY MPHONY'S FORM 990 AND THE AUDITED FINANCIAL REPORTS, FROM THE PREVIOUS THREE YEARS (AT A MINIMUM), WILL BE AVAILABLE (FOR INSPECTION OR COPYING) AT DAVIES SY MPHONY HALL DURING NORMAL BUSINESS HOURS AT NO CHARGE. WHEN RESPONDING TO A PUBLIC INSPECTION REQUEST FOR FINANCIAL STATEMENTS OR THE FORM 990 BY ANY ONE, THE SY MPHONY SHALL FULFILL SUCH REQUEST IN A TIMELY FASHION WITHOUT INQUIRING AS TO THE REASON FOR THE PUBLIC INSPECTION REQUEST IN A DDITION, THE SY MPHONY'S FORM 990 IS AVAILABLE TO THE PUBLIC ON THE INTERNET AT GUIDESTAR

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR	FORM 990, PART	NET UNREALIZED GAINS ON INVESTMENTS 17,870,169 CHANGE IN PENSION BENEFIT
FUND BALANCES	XI, LINE 5	LIABILITIES 840,071 TOTAL TO FORM 990, PART XI, LINE 5 18,710,240

ldentifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	NO CHANGE IN THE AUDIT COMMITTEE'S OVERSIGHT PROCESS

ldentifier	Return Reference	Explanation
REASON FOR AMENDING FORM 990	FORM 990, PAGE 1, SECTION B	FORM 990 IS BEING AMENDED TO REFLECT A CORRECTION TO THE STATEMENT OF FUNCTIONAL EXPENSES ON FORM 990, PART IX LINE 11E COLUMN D AS ORIGINALLY FILED \$933,396 LINE 11E COLUMN D AS AMENDED \$469,352 LINE 24 F COLUMN B AS ORIGINALLY FILED \$511,914 LINE 24 F COLUMN B AS AMENDED \$975,959 SCHEDULE G PART 1, LINE 2B,(V) AS ORIGINALLY FILED \$933,396 SCHEDULE G PART 1, LINE 2B,(V) AS AMENDED \$469,352

efile GRAPHIC print -	DO NOT PROCESS As Filed Data -	·				DLN: 934	932370	04142
SCHEDULE R (Form 990)	► Complete if the orga	Organizations anization answered " Attach to Form 990.	2 Оре	OMB No 1545-0047 2010 Open to Public Inspection				
Internal Revenue Service Name of the organization					Employer ider	ntification number	spectio	n
SAN FRANCISCO SYMPHONY					94-1156284			
Part I Identificatio	on of Disregarded Entities (Complet	e if the organizatio	on answered "Yes	" on Form 990, Pa	rt IV, line 33.)	_		
Name, address, a	(a) and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
	on of Related Tax-Exempt Organizations during the		If the organization	n answered "Yes"	on Form 990, Par	l t IV, line 34 becaus	se it had	one
	(a) d EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti	g) 12(b)(13) rolled iization
							Yes	No
							+	
							1	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2010

Part III Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (i) Code V—UBI (j) (h) (c) (e) (a) Name, address, and EIN of Disproprtionate General or (b) Legal (d) (f) (g) Predominant income (k) allocations? amount in box 20 of managing Primary activity domicile Direct controlling Share of total income Share of end-of-year (related, unrelated, Percentage Schedule K-1 partner? related organization (state or entity assets excluded from tax ownership (Form 1065) foreign under sections 512country) 514) Yes No Yes No

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

			<u> </u>		, ,		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) POOLED INCOME FUND DAVIES SYMPHONY HALL 201 VAN NESS A SAN FRANCISCO, CA94102	TRUST	СА	SAN FRANCISCO SYMPHONY	т		138,421	89 000 %
(2) CRUT #1 DAVIES SYMPHONY HALL 201 VAN NESS A SAN FRANCISCO, CA94102	TRUST	CA	SAN FRANCISCO SYMPHONY	т		142,312	76 000 %
(3) CRUT #2 DAVIES SYMPHONY HALL 201 VAN NESS A SAN FRANCISCO, CA94102	TRUST	CA	SAN FRANCISCO SYMPHONY	т		128,614	73 000 %
(4) CRUT #3 DAVIES SYMPHONY HALL 201 VAN NESS A SAN FRANCISCO, CA94102	TRUST	СА	SAN FRANCISCO SYMPHONY	т		148,805	58 000 %
(5) UNITRUST DAVIES SYMPHONY HALL 201 VAN NESS A SAN FRANCISCO, CA94102	TRUST	CA	SAN FRANCISCO SYMPHONY	т		87,857	53 000 %

Page **2**

Schedule R (Form 990) 2010

Julie			Pa	ge J
Ра	ITT V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b		No
с	Gift, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharıng of facılıtıes, equipment, mailing lists, or other assets	1m		No
n	Sharing of paid employees	1n		No
o	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1p		No
P	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther transfer of cash or property from other organization(s)	1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	-	· · · · · · · · · · · · · · · · · · ·	
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
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Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are partr sect 501(c organiz	all ners non c)(3) rations?	(e) Share of end-of-year assets	(f) Disprop allocat) rtionate ions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	h) eral or agıng :ner?
			Yes			Yes	No		Yes	No

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Part VII Supplemental Information

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

Identifier Return Reference Explanation

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