

PUBLIC DISCLOSURE COPY

OMB No. 1545-0047

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury
Internal Revenue Service

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

2010
Open to Public Inspection

A For the 2010 calendar year, or tax year beginning **AUGUST 01**, 2010, and ending **JULY 31**, 20 **11**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization **NASHVILLE SYMPHONY ASSOCIATION**
 Doing Business As **THE NASHVILLE SYMPHONY**
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1 SYMPHONY PLACE
 City or town, state or country, and ZIP + 4
NASHVILLE, TN 37201

D Employer identification number
62-0550979

E Telephone number
(615)687-6515

G Gross receipts \$ **71,773,522**

F Name and address of principal officer: **ALAN VALENTINE**
1 SYMPHONY PLACE, NASHVILLE, TN 37201

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

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

J Website: ▶ **NASHVILLESYMPHONY.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1946** **M** State of legal domicile: **TN**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE NASHVILLE SYMPHONY IS DEDICATED TO ACHIEVING THE HIGHEST STANDARD FOR EXCELLENCE IN MUSICAL PERFORMANCE AND EDUCATIONAL PROGRAMS, WHILE ENGAGING THE COMMUNITY, ENRICHING AUDIENCES AND SHAPING CULTURAL LIFE.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	82
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	78
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	494
	6	Total number of volunteers (estimate if necessary)	6	400
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-698,206
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-698,206	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 12,006,190	Current Year 14,702,020
	9	Program service revenue (Part VIII, line 2g)	6,457,243	5,947,595
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,794,853	6,443,756
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,986,112	18,764,400
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	46,244,398	45,857,771
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	7,100
14		Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	12,616,603	12,721,214
16a		Professional fundraising fees (Part IX, column (A), line 11e)	288,230	393,939
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,169,949		
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	54,209,673	20,062,521
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	67,121,606	33,185,174	
19	Revenue less expenses. Subtract line 18 from line 12	-20,877,208	12,672,597	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 224,336,671	End of Year 209,803,881
	21	Total liabilities (Part X, line 26)	146,593,690	116,778,686
	22	Net assets or fund balances. Subtract line 21 from line 20	77,742,981	93,025,195

Part II Signature Block

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

Sign Here ▶ Signature of officer **MICHAEL R KIRBY, CHIEF FINANCIAL OFFICER** Date

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name *Rachel Spurlock* Preparer's signature *Rachel Spurlock* Date *1/24/12* Check if self-employed PTIN

Firm's name ▶ **CROWE HORWATH LLP** Firm's EIN ▶
 Firm's address ▶ **105 CONTINENTAL PLACE, SUITE 200, BRENTWOOD, TN 37027** Phone no. **(615)360-5500**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2010)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1 SYMPHONY PLACE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NASHVILLE, TN 37201	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ▶ MICHAEL R. KIRBY

Telephone No. ▶ (615)687-6515 FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until March 15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year 20 ____ or
 ▶ tax year beginning August 01, 20 10, and ending July 31, 20 11.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part III Statement of Program Service Accomplishments

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

- 1 Briefly describe the organization's mission:
MISSION STATEMENT - THE NASHVILLE SYMPHONY IS DEDICATED TO ACHIEVING THE HIGHEST STANDARD FOR EXCELLENCE IN MUSICAL PERFORMANCE AND EDUCATIONAL PROGRAMS, WHILE ENGAGING THE COMMUNITY, ENRICHING AUDIENCES AND SHAPING CULTURAL LIFE. CONTINUED IN SCHEDULE O.
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O.
- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 26,165,521 including grants of \$ 0) (Revenue \$ 24,638,066)
THE NASHVILLE SYMPHONY'S COMMITMENT TO THE HIGHEST ARTISTIC QUALITY AND TO PERFORMING A BROAD RANGE OF MUSICAL OFFERINGS HAS HELPED TO ESTABLISH THE ORCHESTRA AS THE STATE OF TENNESSEE'S PREEMINENT CULTURAL INSTITUTION. THE NASHVILLE SYMPHONY PERFORMED MORE THAN 140 CONCERTS DURING FISCAL YEAR 2011, SELLING A TOTAL OF MORE THAN 101,000 TICKETS. CONTINUED IN SCHEDULE O.

4b (Code:) (Expenses \$ 1,523,177 including grants of \$ 7,500) (Revenue \$ 535,723)
COMMUNITY SERVICE IS AT THE HEART OF THE NASHVILLE SYMPHONY'S MISSION, AND IN FISCAL YEAR 2011, THE ORCHESTRA REACHED MORE THAN 200,000 PEOPLE THROUGH ITS FREE EDUCATION AND COMMUNITY ENGAGEMENT PROGRAMS. CONTINUED IN SCHEDULE O.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
 (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ▶ 27,688,698

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2 ✓	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	✓
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	✓
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? <i>If "Yes," complete Schedule D, Part IV</i>	9	✓
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 ✓	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a ✓	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	✓
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	✓
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d ✓	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e ✓	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	✓
12 a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a ✓	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	✓
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b ✓	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	✓
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17 ✓	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 ✓	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	✓
20 a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	✓
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
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>		✓
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>	✓	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	✓	
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 through 24d and complete Schedule K. If "No," go to line 25</i>	✓	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		✓
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		✓
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? <i>If "Yes," complete Schedule L, Part I</i>		✓
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 "Yes," complete Schedule L, Part I</i>		✓
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 "Yes," complete Schedule L, Part II</i>		✓
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>		✓
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c 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>	✓	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	✓	
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>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
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>		✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		✓
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		✓
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
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? <i>If "Yes," complete Schedule R, Part VI</i>		✓
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	157	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	494	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	✓	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
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?		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).			
a	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?	✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?			
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:			
a	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	10b	
11 Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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.		
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	13b	
c	Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 82	
b	Enter the number of voting members included in line 1a, above, who are independent	1b 78	
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	✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	✓
6	Does the organization have members or stockholders?	6	✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	✓
b	Each committee with authority to act on behalf of the governing body?	8b	✓
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	✓

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	✓
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	✓
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓
13	Does the organization have a written whistleblower policy?	13	✓
14	Does the organization have a written document retention and destruction policy?	14	✓
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?		
a	The organization's CEO, Executive Director, or top management official	15a	✓
b	Other officers or key employees of the organization	15b	✓
	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	✓
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	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ►
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 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.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► MICHAEL R. KIRBY
1 SYMPHONY PLACE, NASHVILLE, TN 37201, (615)687-6515

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN T. ROCHFORD BOARD MEMBER, VICE CHAIR	1	✓		✓			0	0	0	
(2) JULIE G. BOEHM BOARD MEMBER, SECRETARY	1	✓		✓			0	0	0	
(3) DAVID WILLIAMS, II BOARD MEMBER, TREASURER	1	✓		✓			0	0	0	
(4) JAMES C. GOOCH BOARD MEMBER, BOARD CHAIR	1	✓		✓			0	0	0	
(5) MICHELLE LACKEY COLLINS BOARD MEMBER	1	✓					0	0	0	
(6) WILIAM M. WILSON BOARD MEMBER	1	✓					0	0	0	
(7) LOUIS B. TODD BOARD MEMBER	1	✓					0	0	0	
(8) GREGG MORTON BOARD MEMBER	1	✓					0	0	0	
(9) ZACHARY LIFF BOARD MEMBER	1	✓					0	0	0	
(10) ELLIOTT WARNER JONES, SR. BOARD MEMBER	1	✓					0	0	0	
(11) LEE ANN INGRAM BOARD MEMBER	1	✓					0	0	0	
(12) AMY GRANT BOARD MEMBER	1	✓					0	0	0	
(13) ROB BIRONAS BOARD MEMBER	1	✓					0	0	0	
(14) SCOTT BECKER BOARD MEMBER	1	✓					0	0	0	
(15) DEVIN SCHULTZ BOARD MEMBER	1	✓					0	0	0	
(16) WILLIAM WIGGINS BOARD MEMBER	1	✓					0	0	0	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) KRISTI SEEHAFFER BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(18) NORMA ROGERS BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(19) STEPHEN SPARKS BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(20) MARK SILVERMAN BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(21) WILLIAM H. BRADY III, CFP BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(22) KEVIN P. LAVENDER BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(23) JANET AYERS BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(24) BILLY RAY HEARN BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(25) JAMES BRYAN BOLES BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(26) STEVE TURNER BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(27) ROBERT E. MCNEILLY, III BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
(28) JEREMY WILLIAMS BOARD MEMBER	1	<input checked="" type="checkbox"/>						0	0	0
1b Sub-total								0	0	0
c Total from continuation sheets to Part VII, Section A								1,303,473		77,280
d Total (add lines 1b and 1c)								1,303,473	0	77,280

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 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	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Section B. Independent Contractors

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
LECG, LLC, PO BOX 952423, ST. LOUIS, MO 63195-2423	CONSULTING	377,685
LOS ANGELES PHILHARMONIC, 151 SOUTH GRAND AVENUE, LOS ANGELES, CA 90012	ARTIST MANAGEMENT	125,000
BANK OF AMERICA MERRILL LYNCH, 100 N BROADWAY, MO2-100-07-15, ST. LOUIS, MO 63102	INVESTMENT MANAGEMENT	122,905
IMG ARTISTS, 152 WEST 57TH ST, 5TH FLOOR, NEW YORK, NY 10019	ARTIST MANAGEMENT	119,100
HIRTLE, CALLAGHAN & CO., 300 BARR HARBOR DR, STE 500, WEST CONSHOHOCKEN, PA 19428	INVESTMENT MANAGEMENT	113,108

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 **5**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	588,618				
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	349,750				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	13,763,652				
	g	Noncash contributions included in lines 1a-1f: \$	55,896				
	h	Total. Add lines 1a-1f ▶	14,702,020				
Program Service Revenue			Business Code				
	2a	TICKET SALES		5,546,395	5,546,395		
	b	ORCHESTRA FEES		401,200	401,200		
	c			0			
	d			0			
	e			0			
	f	All other program service revenue		0	0	0	
	g	Total. Add lines 2a-2f ▶		5,947,595			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		1,301,165		1,301,165	
	4	Income from investment of tax-exempt bond proceeds ▶		0			
	5	Royalties ▶		0			
	6a	Gross Rents	(i) Real	(ii) Personal			
			1,678,399				
			b Less: rental expenses	2,376,605			
			c Rental income or (loss)	-698,206	0		
	d	Net rental income or (loss) ▶		-698,206	-698,206		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
			27,815,196	15,816			
			b Less: cost or other basis and sales expenses	22,674,805	13,616		
			c Gain or (loss)	5,140,391	2,200		
	d	Net gain or (loss) ▶		5,142,591		5,142,591	
	8a	Gross income from fundraising events (not including \$ 588,618 of contributions reported on line 1c). See Part IV, line 18 a		1,087,137			
	b	Less: direct expenses b		850,725			
c	Net income or (loss) from fundraising events ▶		236,412		236,412		
9a	Gross income from gaming activities. See Part IV, line 19 a						
b	Less: direct expenses b						
c	Net income or (loss) from gaming activities ▶		0				
10a	Gross sales of inventory, less returns and allowances a						
		b Less: cost of goods sold b					
		c Net income or (loss) from sales of inventory ▶		0			
Miscellaneous Revenue		Business Code					
11a	FLOOD PROCEEDS		18,879,877	18,879,877			
b	HANDLING CHARGES FOR TICKET SALES		285,192	285,192			
c	CONCESSIONS		26,458	26,458			
d	All other revenue		34,667	34,667	0		
e	Total. Add lines 11a-11d ▶		19,226,194				
12	Total revenue. See instructions. ▶		45,857,771	25,173,789	-698,206	6,680,168	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(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	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	7,500	7,500		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,220,576	709,895	510,681	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	8,993,153	7,668,777	610,761	713,615
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	673,159	579,349	54,677	39,133
9	Other employee benefits	1,018,931	893,578	70,189	55,164
10	Payroll taxes	815,395	674,455	69,234	71,706
11	Fees for services (non-employees):				
a	Management	0			
b	Legal	0			
c	Accounting	68,268		68,268	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	393,939			393,939
f	Investment management fees	361,594		361,594	
g	Other	801,313	35,253	766,060	
12	Advertising and promotion	1,024,378	1,024,378		
13	Office expenses	3,324,580	2,615,203	443,453	265,924
14	Information technology	224,737		224,737	
15	Royalties	83,663	83,663		
16	Occupancy	0			
17	Travel	12,620	12,620		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	73,518	22,453	35,084	15,981
20	Interest	5,484,093	5,484,093		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	7,381,178	7,381,178		
23	Insurance	320,428	208,639	111,789	
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.)				
a	FLOOD RELATED EXPENSES	287,664	287,664		
b	BAD DEBT EXPENSE	614,487			614,487
c	-----	0			
d	-----	0			
e	-----	0			
f	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24f	33,185,174	27,688,698	3,326,527	2,169,949
26	Joint costs. Check here <input type="checkbox"/> 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			

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,110,613	1	3,167,535
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	25,922,938	3	30,299,769
	4 Accounts receivable, net	277,663	4	619,984
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,806,832	9	1,806,070
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 142,316,213		
	b Less: accumulated depreciation	10b 34,714,610	109,967,058	10c 107,601,603
	11 Investments—publicly traded securities	69,103,355	11	46,992,664
	12 Investments—other securities. See Part IV, line 11	3,133,255	12	4,030,179
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	12,014,957	15	15,286,077
16 Total assets. Add lines 1 through 15 (must equal line 34)	224,336,671	16	209,803,881	
Liabilities	17 Accounts payable and accrued expenses	27,530,296	17	1,174,820
	18 Grants payable		18	
	19 Deferred revenue	3,676,467	19	4,195,518
	20 Tax-exempt bond liabilities	91,100,000	20	88,270,000
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	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	10,000,000	23	10,000,000
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	14,286,927	25	13,138,348
	26 Total liabilities. Add lines 17 through 25	146,593,690	26	116,778,686
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	49,624,132	27	60,466,150
	28 Temporarily restricted net assets	25,618,824	28	30,057,410
	29 Permanently restricted net assets	2,500,025	29	2,501,635
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	77,742,981	33	93,025,195
	34 Total liabilities and net assets/fund balances.	224,336,671	34	209,803,881

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	45,857,771
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,185,174
3	Revenue less expenses. Subtract line 2 from line 1	3	12,672,597
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	77,742,981
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,609,617
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	93,025,195

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		✓
2b	✓	
2c	✓	
3a	✓	
3b	✓	

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(29) DAVID T. VANDEWATER BOARD MEMBER	1	✓						0	0	0
(30) RUTH E. JOHNSON BOARD MEMBER	1	✓						0	0	0
(31) JULIAN B. BAKER JR. BOARD MEMBER	1	✓						0	0	0
(32) JACK O. BOVENDER, JR. BOARD MEMBER	1	✓						0	0	0
(33) HOWARD STRINGER BOARD MEMBER	1	✓						0	0	0
(34) RICHARD MARADIK, JR. BOARD MEMBER	1	✓						0	0	0
(35) PAMELA L. CARTER BOARD MEMBER	1	✓						0	0	0
(36) ROBERT A. MCCABE, JR. BOARD MEMBER	1	✓						0	0	0
(37) BEVERLY K. SMALL BOARD MEMBER	1	✓						0	0	0
(38) DAN W. HOGAN BOARD MEMBER	1	✓						0	0	0
(39) EDUARDO MINARDI BOARD MEMBER	1	✓						0	0	0
(40) BETSY WILLS BOARD MEMBER	1	✓						0	0	0
(41) JOHNNA WATSON BOARD MEMBER	1	✓						0	0	0
(42) DAVID STEELE EWING BOARD MEMBER	1	✓						0	0	0
(43) RUSSELL W. BATES BOARD MEMBER	1	✓						0	0	0
(44) ANASTASIA BROWN BOARD MEMBER	1	✓						0	0	0
(45) CARL GRIMSTAD BOARD MEMBER	1	✓						0	0	0
(46) JOHN FERGUSON BOARD MEMBER	1	✓						0	0	0
(47) C. KEITH HERRON BOARD MEMBER	1	✓						0	0	0
(48) PATTI SMALLWOOD BOARD MEMBER	1	✓						0	0	0

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule C)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(49) CLAY JACKSON BOARD MEMBER	1	✓						0	0	0
(50) HAL N. PENNINGTON BOARD MEMBER	1	✓						0	0	0
(51) BRUCE D. SULLIVAN BOARD MEMBER	1	✓						0	0	0
(52) ELLEN HARRISON MARTIN BOARD MEMBER	1	✓						0	0	0
(53) JOHN GAWALUCK BOARD MEMBER	1	✓						0	0	0
(54) EDWARD GOODRICH BOARD MEMBER	1	✓						0	0	0
(55) ANNE L. RUSSELL BOARD MEMBER	1	✓						0	0	0
(56) JAMES L. BECKNER BOARD MEMBER	1	✓						0	0	0
(57) GREG DAILY BOARD MEMBER	1	✓						0	0	0
(58) WAYNE J. RILEY, M.D. BOARD MEMBER	1	✓						0	0	0
(59) MARTHA R. INGRAM BOARD MEMBER	1	✓						0	0	0
(60) JAY TURNER BOARD MEMBER	1	✓						0	0	0
(61) LEE A. BEAMAN BOARD MEMBER	1	✓						0	0	0
(62) CHARLES PRUETT BOARD MEMBER	1	✓						0	0	0
(63) FRANCIS S. GUESS BOARD MEMBER	1	✓						0	0	0
(64) VIRGINIA BYRN BOARD MEMBER	1	✓						0	0	0
(65) SADHNA V. WILLIAMS BOARD MEMBER	1	✓						0	0	0
(66) DR. DAVID L. BLACK BOARD MEMBER	1	✓						0	0	0
(67) ANN CARELL BOARD MEMBER	1	✓						0	0	0
(68) REBECCA COLE BOARD MEMBER	1	✓						0	0	0
(69) SUSANNAH C. CULBERTSON BOARD MEMBER	1	✓						0	0	0

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(70) BEN L. CUNDIFF BOARD MEMBER	1	✓						0	0	0
(71) MARY HELEN LAW BOARD MEMBER	1	✓						0	0	0
(72) MADELINE MYERS BOARD MEMBER	1	✓						0	0	0
(73) PETER NEFF BOARD MEMBER	1	✓						0	0	0
(74) JOSEPH K. PRESLEY BOARD MEMBER	1	✓						0	0	0
(75) DR. JESSE B. REGISTER BOARD MEMBER	1	✓						0	0	0
(76) MICHAEL SAMIS BOARD MEMBER	1	✓						0	0	0
(77) JAMES C. SEABURY III BOARD MEMBER	1	✓						0	0	0
(78) BRETT SWEET BOARD MEMBER	1	✓						0	0	0
(79) JEFFERY WALRAVEN BOARD MEMBER	1	✓						0	0	0
(80) TED HOUSTON WELCH BOARD MEMBER	1	✓						0	0	0
(81) CLARE YANG BOARD MEMBER	1	✓						0	0	0
(82) SHIRLEY ZEITLIN BOARD MEMBER	1	✓						0	0	0
(83) MICHAEL KIRBY VICE PRESIDENT AND CFO	40			✓				130,386	0	12,360
(84) ALAN D. VALENTINE PRESIDENT AND CEO	40			✓				380,295	0	18,060
(85) MARK A. BLAKEMAN GENERAL MANAGER AND VP OF ORCHESTRA AND BUILDING OPERATIONS	40				✓			165,796	0	14,460
(86) GIANCARLO GUERERRO MUSIC DIRECTOR	40				✓			453,552	0	18,060
(87) MITCHELL KORN VICE PRESIDENT OF EDUCATION	40				✓			173,444	0	14,340

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
-------------------------------------------------------------------	-----------------------------------------------------

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
 - e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
 - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									0

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2010

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

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

Section A. Public Support

Calendar year (or fiscal year beginning 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning 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.")	20,541,047	39,050,742	14,097,332	12,006,190	14,702,020	100,397,331
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	7,244,028	8,185,696	8,728,458	6,599,649	6,259,245	37,017,076
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	27,785,075	47,236,438	22,825,790	18,605,839	20,961,265	137,414,407
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	235,553	185,974	200,824	314,428	245,063	1,181,842
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						0
c Add lines 7a and 7b	235,553	185,974	200,824	314,428	245,063	1,181,842
8 Public support (Subtract line 7c from line 6.)						136,232,565

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	27,785,075	47,236,438	22,825,790	18,605,839	20,961,265	137,414,407
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,850,880	6,094,441	3,898,581	2,651,717	2,979,564	19,475,183
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	3,850,880	6,094,441	3,898,581	2,651,717	2,979,564	19,475,183
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	231,709		156,045	31,757	34,667	454,178
13 Total support. (Add lines 9, 10c, 11, and 12.)	31,867,664	53,330,879	26,880,416	21,289,313	23,975,496	157,343,768
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	86.58 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	87.58 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	12.38 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	12.09 %

- 19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . ▶
- b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV

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

Return Reference	Identifier	Explanation
SCHEDULE A, PART III, SECTION B, LINE 12	OTHER INCOME	MISCELLANEOUS INCOME: 2006-\$231,709 2007-\$0 2008-\$156,045 2009-\$31,757 2010-\$34,667

Schedule of Contributors

2010

▶ Attach to Form 990, 990-EZ, or 990-PF.

Name of the organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
-----------------------------------------------------------------------	---------------------------------------------------------

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ
 - 501(c)(3) (enter number) organization
 - 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 - 527 political organization
- Form 990-PF
 - 501(c)(3) exempt private foundation
 - 4947(a)(1) nonexempt charitable trust treated as a private foundation
 - 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
--------------------------------------------------------	----------------------------------------------

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	----- ----- -----	\$ ----- 750,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	----- ----- -----	\$ ----- 500,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
--------------------------------------------------------	----------------------------------------------

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----

Name of organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
--------------------------------------------------------	----------------------------------------------

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

Name of the organization

Employer identification number

NASHVILLE SYMPHONY ASSOCIATION

62-0550979

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year, and two Yes/No questions regarding donor advised funds.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include Purpose(s) of conservation easements, Number of conservation easements (2a, 2b, 2c, 2d), Number of conservation easements modified, Number of states where property is located, Does the organization have a written policy, Staff and volunteer hours, Amount of expenses incurred, and Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B).

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

Table with 2 columns: Amounts. Rows include 1a) If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. 1b) If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2) If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a) Revenues included in Form 990, Part VIII, line 1 b) Assets included in Form 990, Part X

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	525,025	8,898,472	8,898,472		
b Contributions	1,610	25			
c Net investment earnings, gains, and losses	95,131	128,245	200,546		
d Grants or scholarships					
e Other expenditures for facilities and programs	95,131	8,395,842			
f Administrative expenses		105,875	200,546		
g End of year balance	526,635	525,025	8,898,472		

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment %
 - b Permanent endowment 100 %
 - c Term endowment %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---------------------------------------------------------------------------------------|-----|----|
| (i) unrelated organizations | ✓ | |
| (ii) related organizations | | ✓ |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | | |
| 3b | | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,824,167		4,824,167
b Buildings		127,686,755	31,393,670	96,293,085
c Leasehold improvements				0
d Equipment		8,612,312	3,320,940	5,291,372
e Other		1,192,979		1,192,979
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				107,601,603

Part VII 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		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEFERRED BOND ISSUANCE COSTS, NET	1,067,726
(2) ACCRUED INSURANCE PROCEEDS RECEIVABLE	14,218,351
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	15,286,077

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) FAIR VALUE OF DERIVATIVE INSTRUMENT	13,138,348
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	13,138,348

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 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	45,857,771
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	33,185,174
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	12,672,597
4	Net unrealized gains (losses) on investments	4	1,461,038
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	1,148,579
9	Total adjustments (net). Add lines 4 through 8	9	2,609,617
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	15,282,214

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

1	Total revenue, gains, and other support per audited financial statements	1	31,482,530
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	1,461,038
b	Donated services and use of facilities	2b	1,028,587
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	2,376,605
e	Add lines 2a through 2d	2e	4,866,230
3	Subtract line 2e from line 1	3	26,616,300
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	361,594
b	Other (Describe in Part XIV.)	4b	18,879,877
c	Add lines 4a and 4b	4c	19,241,471
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	45,857,771

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	16,200,316
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,028,587
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	2,376,605
e	Add lines 2a through 2d	2e	3,405,192
3	Subtract line 2e from line 1	3	12,795,124
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	361,594
b	Other (Describe in Part XIV.)	4b	20,028,456
c	Add lines 4a and 4b	4c	20,390,050
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	33,185,174

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; 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.

SEE NEXT PAGE

Part XIV

Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; 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.

Return Reference	Identifier	Explanation	
SCHEDULE D, PART V, LINE 4	INTENDED USES OF ENDOWMENT FUNDS	THE ENDOWMENT FUNDS ARE USED FOR MISSION RELATED ACTIVITIES.	
SCHEDULE D, PART XI, LINE 8	OTHER CHANGES IN NET ASSETS	(a) Description	(b) Amount
		CHANGE IN FAIR VALUE OF DERIVATIVE INSTRUMENTS	1,148,579
SCHEDULE D, PART XII, LINE 2D	OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
		RENTAL EXPENSES NETTED ON FORM 990	2,376,605
SCHEDULE D, PART XII, LINE 4B	OTHER REVENUES IN FORM 990 NOT IN AUDITED FINANCIAL STATEMENTS	(a) Description	(b) Amount
		INSURANCE PROCEEDS NETTED IN AUDITED FINANCIAL STATEMENTS	18,879,877
SCHEDULE D, PART XIII, LINE 2D	OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
		RENTAL EXPENSES NETTED ON FORM 990	2,376,605
SCHEDULE D, PART XIII, LINE 4B	OTHER EXPENSES IN FORM 990 NOT IN AUDITED FINANCIAL STATEMENTS	(a) Description	(b) Amount
		INSURANCE PROCEEDS NETTED IN AUDITED FINANCIAL STATEMENTS	18,879,877
		CHANGE IN FAIR VALUE OF DERIVATIVE INSTRUMENT	1,148,579

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

NASHVILLE SYMPHONY ASSOCIATION

62-0550979

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	INVESTMENTS	3,980,000
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			3,980,000
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			3,980,000

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		SYMPHONY BALL (event type)	FASHION SHOW (event type)	2 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	766,267	390,541	518,947	1,675,755
	2 Less: Charitable contributions	338,129	129,494	120,995	588,618
	3 Gross income (line 1 minus line 2)	428,138	261,047	397,952	1,087,137
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	196,828	121,733	96,267	414,828
	7 Food and beverages	52,753	61,569	10,516	124,838
	8 Entertainment	9,800	55,868	110,775	176,443
	9 Other direct expenses	38,177	64,606	31,833	134,616
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(850,725)
11 Net income summary. Combine line 3, column (d), and line 10 ▶				236,412	

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

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

- 9** Enter the state(s) in which the organization operates gaming activities: _____
- a** Is the organization licensed to operate gaming activities in each of these states? Yes No
- b** If "No," explain: _____
- _____
- _____
- 10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
- b** If "Yes," explain: _____
- _____
- _____

Part IV

Supplemental Information Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

Return Reference	Identifier	Explanation
SCHEDULE G, PART I, LINE 2B	PROFESSIONAL FUNDRAISING ACTIVITIES	THE ORGANIZATION CONTRACTED COMMUNITY COUNSELING SERVICE (CCS) TO PROVIDE PROFESSIONAL FUNDRAISING SERVICES IN PLANNING, ORGANIZING, AND INITIALIZING A MAJOR FUNDRAISING CAMPAIGN. THE SERVICE AGREEMENT PROVIDED FOR TWO ASSIGNED PERSONNEL, ONE OF WHOM WAS ONSITE TO PROVIDE RESIDENT FUNDRAISING SERVICES. THE AGREEMENT ALSO COVERED THE NASHVILLE SYMPHONY'S RESPONSIBILITY TO MAKE AN OPERATIONAL BUDGET AVAILABLE TO COVER OPERATIONAL EXPENSES, IN ADDITION TO PROFESSIONAL FEES, INCURRED BY BOTH THE NASHVILLE SYMPHONY AND CCS FOR PURPOSES OF THE CAMPAIGN. SUCH OPERATIONAL EXPENSES INCLUDE COLLATERAL MATERIALS, POSTAGE, SHIPPING/DELIVERY, PRINTING/COPYING, RELATED TRAVEL, TELEPHONE/CALL PHONE, AND PRODUCTION OF RESEARCH REPORTS. PERSONAL LIVING AND PERSONAL TRAVEL EXPENSES OF CCS PERSONNEL ARE EXCLUDED. THE AGREEMENT ALSO PROVIDED THAT ALL EXPENSES OF \$200 OR GREATER MUST BE APPROVED BY THE NASHVILLE SYMPHONY BEFORE THEY ARE INCURRED. FEES FOR SERVICES WERE \$390,000 AND REIMBURSED EXPENSES TOTALED \$3,993.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

NASHVILLE SYMPHONY ASSOCIATION

Employer identification number

62-0550979

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Cat. No. 50055P

Schedule I (Form 990) (2010)

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

Return Reference	Identifier	Explanation
SCHEDULE I, PART I, LINE 2	PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE SCHOLARSHIPS ARE AWARDED TO STUDENTS IN TWO CATEGORIES. THE SCHOLARSHIPS ARE ACTUALLY DISTRIBUTED TO THE PROVIDER OF THE MUSIC LESSONS OF THE AWARD WINNER, TO BE USED IN FUTURE MUSIC LESSONS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

NASHVILLE SYMPHONY ASSOCIATION

Employer identification number
62-0550979

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

	Yes	No
1b		
2		✓
3		
4a		✓
4b		✓
4c		✓
5a		✓
5b		✓
6a		✓
6b		✓
7		✓
8		✓
9		

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?
 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
b Any related organization?
 If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
b Any related organization?
 If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

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

	(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation					(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation						
1	MARK A. BLAKEMAN	165,796	0	0	11,100	3,360	180,256	0		
	(i)	0	0	0	0	0	0	0		
	(ii)	0	0	0	0	0	0	0		
2	ALAN D. VALENTINE	380,295	0	0	14,700	3,360	398,355	0		
	(i)	0	0	0	0	0	0	0		
	(ii)	0	0	0	0	0	0	0		
3	GIANCARLO GUERERRO	453,552	0	0	14,700	3,360	471,612	0		
	(i)	0	0	0	0	0	0	0		
	(ii)	0	0	0	0	0	0	0		
4	MITCHELL KORN	173,444	0	0	10,980	3,360	187,784	0		
	(i)	0	0	0	0	0	0	0		
	(ii)	0	0	0	0	0	0	0		
5										
	(i)									
	(ii)									
6										
	(i)									
	(ii)									
7										
	(i)									
	(ii)									
8										
	(i)									
	(ii)									
9										
	(i)									
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	(i)									
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12										
	(i)									
	(ii)									
13										
	(i)									
	(ii)									
14										
	(i)									
	(ii)									
15										
	(i)									
	(ii)									
16										
	(i)									
	(ii)									

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

NASHVILLE SYMPHONY ASSOCIATION

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
INDUSTRIAL DEVELOPMENT BOARD OF THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY, TENNESSEE	62-1486674	5920653KO	1/8/2004	102,000,000	SEE SCHEDULE O		✓		✓		
B											
C											
D											

Employer identification number
62-05550979

Supplemental Information on Tax-Exempt Bonds

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

OMB No. 1545-0047

2010

Open to Public Inspection

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		13,730,000						
2 Amount of bonds legally defeased		0						
3 Total proceeds of issue		104,242,331						
4 Gross proceeds in reserve funds		0						
5 Capitalized interest from proceeds		8,135,137						
6 Proceeds in refunding escrows		0						
7 Issuance costs from proceeds		1,180,869						
8 Credit enhancement from proceeds		789,499						
9 Working capital expenditures from proceeds		0						
10 Capital expenditures from proceeds		77,633,197						
11 Other spent proceeds		16,503,629						
12 Other unspent proceeds		0						
13 Year of substantial completion		2006						

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	✓							
15 Were the bonds issued as part of an advance refunding issue?		✓						
16 Has the final allocation of proceeds been made?	✓							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	✓							

Part III Private Business Use

1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?									
2 Are there any lease arrangements that may result in private business use of bond-financed property?		✓							

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

Cat. No. 50193E

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		✓						
b Are there any research agreements that may result in private business use of bond-financed property?		✓						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	✓							
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %				%		%
5 Enter the percentage of financed property used in a private business, use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %				%		%
6 Total of lines 4 and 5		0 %				%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	✓							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		✓						
2 Is the bond issue a variable rate issue?	✓							
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		✓						
b Name of provider								
c Term of hedge								0
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		✓						
b Name of provider								
c Term of GIC								0
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		✓						
6 Did the bond issue qualify for an exception to rebate?	✓							

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

SEE NEXT PAGE

Part V**Supplemental Information** Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Identifier	Explanation
SCHEDULE K, PART I, LINE A, COLUMN (F)	DESCRIPTION OF PURPOSE OF BONDS	THE PURPOSE OF THE BONDS IS FOR: I) FINANCING THE ACQUISITION, CONSTRUCTION AND EQUIPPING OF A SYMPHONY HALL IN NASHVILLE, DAVIDSON COUNTY, TENNESSEE, II) REFUNDING THE ISSUER'S \$16,500,000 VARIABLE RATE REVENUE BONDS, SERIES A, III) ACQUIRING PROPERTY TO BE USED AS A SURFACE PARKING LOT TO SERVICE THE PROJECT; IV) PAYING CAPITALIZED INTEREST ON THE BONDS, AND V) PAYING A PORTION OF THE COSTS OF ISSUANCE FOR THE BONDS.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open To Public Inspection

Name of the organization NASHVILLE SYMPHONY ASSOCIATION	Employer identification number 62-0550979
-------------------------------------------------------------------	-----------------------------------------------------

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

1	(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
		To	From			Yes	No	Yes	No	Yes	No
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
Total ▶ \$					0						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			

Part V**Supplemental Information** Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Identifier	Explanation
SCHEDULE L, PART IV, COLUMN (B)	RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION	SUNTRUST ROBERT MCNEILLY, DIRECTOR OF NASHVILLE SYMPHONY ASSOCIATION, WAS SERVING AS THE CHAIRMAN/CEO/PRESIDENT OF SUNTRUST, TENNESSEE, AT THE TIME OF THE TRANSACTION. PINNACLE GROUP INSURANCE JOHNNA WATSON, DIRECTOR OF NASHVILLE SYMPHONY ASSOCIATION, WAS SERVING AS THE PRESIDENT/CEO OF PINNACLE GROUP AT THE TIME OF THE TRANSACTION. REGIONS BANK C. KEITH HERRON, DIRECTOR OF NASHVILLE SYMPHONY ASSOCIATION, WAS SERVING AS REGIONAL PRESIDENT, AT THE TIME OF THE TRANSACTION. PINNACLE FINANCIAL PARTNERS ROBERT MCCABE, DIRECTOR OF NASHVILLE SYMPHONY ASSOCIATION, WAS SERVING AS THE CHAIRMAN OF PINNACLE FINANCIAL PARTNERS AT THE TIME OF THE TRANSACTION.

Part IV**Business Transactions Involving Interested Persons (continued)**

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SUN TRUST BANK	SEE SCHEDULE O	2,355,840	LETTER OF CREDIT FEES AND SWAP AGREEMENTS		✓
(2) PINNACLE GROUP INSURANCE	SEE SCHEDULE O	840,085	HEALTH INSURANCE PREMIUMS		✓
(3) REGIONS BANK	SEE SCHEDULE O	757,426	LETTER OF CREDIT FEES AND TRUSTEE FEES		✓
(4) PINNACLE FINANCIAL PARTNERS	SEE SCHEDULE O	187,132	LETTER OF CREDIT FEES		✓

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2010

**Open To Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization
NASHVILLE SYMPHONY ASSOCIATION

Employer identification number
62-0550979

Part I Types of Property		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (INSTRUMENTS)	✓	1	55,896	MARKET VALUE
26	Other ▶ ()				
27	Other ▶ ()				
28	Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

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

**Schedule O
(Form 990)**

Department of Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the Organization
NASHVILLE SYMPHONY ASSOCIATION

Employer Identification Number
62-0550979

Return Reference	Identifier	Explanation
FORM 990, PART III, LINE 1	ORGANIZATION'S MISSION - CONTINUED	<p>CONTINUED FROM PAGE 2, PART III, LINE 1:</p> <p>ARTISTIC VISION STATEMENT ACHIEVE RECOGNIZED ARTISTIC EXCELLENCE IN THE PERFORMANCE AND PRESENTATION OF THE HIGHEST QUALITY MUSIC, WITH A FOCUS ON THE CREATION, PROMOTION AND PRESERVATION OF A DISTINCTLY AMERICAN REPERTOIRE.</p> <p>EDUCATION VISION STATEMENT ENGAGE AND ENRICH PEOPLE OF ALL AGES BY EXPLORING, EXPERIENCING AND CREATING MUSIC.</p>
FORM 990, PART III, LINE 4A	PROGRAM SERVICE DESCRIPTION	<p>CONTINUED FROM PAGE 2, PART III, LINE 4A:</p> <p>THE CONCERT SEASON OPENED UNDER UNUSUAL CIRCUMSTANCES, AS THE NASHVILLE SYMPHONY'S HOME, SCHERMERHORN SYMPHONY CENTER, WAS IN THE PROCESS OF RECOVERING FROM A FLOOD IN MAY 2010 THAT CAUSED \$40 MILLION IN DAMAGES TO THE BUILDING, WHILE THE BUILDING UNDERWENT EXTENSIVE REMEDIATION AND REBUILDING, THE ORCHESTRA RELOCATED ITS FALL CONCERTS TO OTHER VENUES IN THE NASHVILLE AREA, RETURNING TO THE SCHERMERHORN WITH A GRAND RE-OPENING CONCERT ON NEW YEAR'S EVE FEATURING THE ORCHESTRA WITH VIOLINIST ITZHAK PERLMAN.</p> <p>THE NASHVILLE SYMPHONY IS FIRMLY GROUNDED IN THE CLASSICAL REPERTOIRE, AND EVERY YEAR IT PERFORMS SOME OF THE BEST-LOVED WORKS IN THE HISTORY OF WESTERN MUSIC IN ITS SUNTRUST CLASSICAL SERIES, WHICH CONSISTS OF 14 THREE-NIGHT PRESENTATIONS. PROGRAMMING HIGHLIGHTS FROM FISCAL YEAR 2011 INCLUDED BEETHOVEN'S FIFTH PIANO CONCERTO, STRAVINSKY'S THE RITE OF SPRING, AN EVENING OF WORKS BY SCANDINAVIAN COMPOSERS SIBELIUS AND NIELSEN, HÖLST'S THE PLANETS, AND PROKOFIEV'S FIFTH SYMPHONY. THE ORCHESTRA'S FIRST CLASSICAL SERIES CONCERT FOLLOWING THE REOPENING OF SCHERMERHORN SYMPHONY CENTER IN JANUARY 2011 WAS BROADCAST LIVE ON NATIONAL PUBLIC RADIO.</p> <p>THE NASHVILLE SYMPHONY IS COMMITTED TO PROMOTING AMERICAN MUSIC AND TO KEEPING CLASSICAL MUSIC VITAL FOR THE 21ST CENTURY, AND IT HAS DEVELOPED A NATIONAL REPUTATION FOR PERFORMING AND COMMISSIONING NEW WORKS BY SOME OF TODAY'S MOST IMPORTANT AMERICAN COMPOSERS, INCLUDING PHILIP GLASS (WHOSE SECOND VIOLIN CONCERTO WAS FEATURED DURING FISCAL YEAR 2011), JOAN TOWER AND MICHAEL DAUGHERTY. THE ORCHESTRA HAS RELEASED NEARLY 20 RECORDINGS OVER THE PAST DECADE, MANY OF THEM FEATURING THE WORK OF CONTEMPORARY AMERICAN COMPOSERS. IN FISCAL YEAR 2011, THE ORCHESTRA EARNED THREE GRAMMY® AWARDS FOR ITS RECORDING OF WORKS BY MICHAEL DAUGHERTY, AND IT ALSO RELEASED A NEW CD OF WORKS BY PULITZER PRIZE-WINNING COMPOSER JOSEPH SCHWANTNER.</p> <p>MOST OF THE ORCHESTRA'S SUBSCRIPTION CLASSICAL CONCERTS FEATURE WORLD-CLASS GUEST PERFORMERS. RECENT SEASONS HAVE INCLUDED VISITS FROM CELLIST YO-YO MA, PIANIST ANDRE WATTS AND THE GROUND-BREAKING POLISH COMPOSER/CONDUCTOR KRZYSZTOF PENDERECKI. IN ADDITION, THE ORCHESTRA REGULARLY FEATURES THE NEWEST GENERATION OF CLASSICAL SOLOISTS, INCLUDING VIOLINISTS STEFAN JACKIW AND TIANWA YANG.</p> <p>ALONG WITH ITS CLASSICAL OFFERINGS, THE NASHVILLE SYMPHONY PERFORMS EIGHT THREE-NIGHT PRESENTATIONS IN ITS BANK OF AMERICA POPS SERIES. THIS SUBSCRIPTION SERIES FEATURES A VARIETY OF POPULAR STYLES, AS REPRESENTED BY SUCH PERFORMERS AS MICHAEL McDONALD, PETER CETERA AND LORRIE MORGAN. A FOUR-CONCERT FAMILY SERIES, THE ANN & MONROE CARELL FAMILY TRUST PIED PIPER SERIES IS GEARED TOWARD YOUNG LISTENERS AND THEIR PARENTS. THE NASHVILLE SYMPHONY HAS ALSO EMERGED IN RECENT YEARS AS A CONCERT PRESENTER, BRINGING A DIVERSE ARRAY OF ARTISTS TO PERFORM AT SCHERMERHORN SYMPHONY CENTER IN CONCERTS WITHOUT THE ORCHESTRA. NOTABLE JAZZ EVENTS HAVE FEATURED PIANIST HERBIE HANCOCK, SAXOPHONIST DAVID SANBORN AND GUITARIST AL DI MEOLA. DUE TO THE NASHVILLE SYMPHONY'S COMMITMENT TO PRESENTING WORLD MUSIC, LOCAL AUDIENCES HAVE HAD THE OPPORTUNITY TO EXPERIENCE LIVE PERFORMANCES, LIKE SOUTH AFRICA'S LADYSMITH BLACK MAMBAZO AND OTHER GLOBAL ARTISTS.</p> <p>FOR MANY YEARS, THE NASHVILLE SYMPHONY HAS ALSO PARTNERED WITH OTHER LOCAL ARTS ORGANIZATIONS, PROVIDING LIVE ORCHESTRAL ACCOMPANIMENT FOR PERFORMANCES BY NASHVILLE BALLET AND NASHVILLE OPERA. ITS REACH IN THE MIDDLE TENNESSEE COMMUNITY IS BOTH BROAD AND DEEP, TOUCHING A TOTAL OF 370,000 PEOPLE IN FISCAL YEAR 2011, AND THROUGH ALL OF ITS VARIOUS ACTIVITIES, IT HAS GREATLY ENRICHED CULTURAL LIFE FOR AUDIENCES OF ALL AGES AND BACKGROUNDS.</p>
FORM 990, PART III, LINE 4B	PROGRAM SERVICE DESCRIPTION	<p>CONTINUED FROM PAGE 2, PART III, LINE 4B:</p> <p>THE NASHVILLE SYMPHONY'S "ONE NOTE, ONE NEIGHBORHOOD" EDUCATION INITIATIVE IS AN INNOVATIVE PARTNERSHIP WITH THE W.O. SMITH/NASHVILLE COMMUNITY MUSIC SCHOOL AND METRO NASHVILLE PUBLIC SCHOOLS. WITH THE SUPPORT OF NISSAN NORTH AMERICA AND THE MARTIN FOUNDATION, THE SYMPHONY AND THESE ORGANIZATIONS WORK TOGETHER TO PROVIDE A COMPREHENSIVE PACKAGE OF MUSIC EDUCATION PROGRAMS FOR STUDENTS AND TEACHERS IN EAST NASHVILLE'S STRATFORD CLUSTER AND NORTH NASHVILLE'S PEARL-COHN CLUSTER. THESE SERVICES INCLUDE AFTER-SCHOOL MUSIC INSTRUCTION FOR COMMITTED STUDENTS, ALONG WITH TRANSPORTATION TO LESSONS, ALL PROVIDED FREE OF CHARGE. IN FISCAL YEAR 2011, THE SYMPHONY EARNED AN \$18,000 GRANT FROM THE NATIONAL ENDOWMENT FOR THE ARTS TO HELP FUND ONE NOTE, ONE NEIGHBORHOOD.</p> <p>THE NASHVILLE SYMPHONY REACHES MANY MORE SCHOOLCHILDREN ACROSS THE MIDDLE TENNESSEE REGION THROUGH A VARIETY OF OTHER PROGRAMS. THESE INCLUDE THE GAYLORD ENTERTAINMENT FOUNDATION YOUNG PEOPLE'S CONCERTS, WHICH BRING STUDENTS FROM PUBLIC, PRIVATE AND HOME SCHOOLS TO THE SCHERMERHORN. OUR ENSEMBLES IN THE SCHOOLS PROGRAM TAKES MEMBERS OF THE NASHVILLE SYMPHONY TO PUBLIC AND PRIVATE SCHOOLS, WHERE THEY PERFORM FOR STUDENTS, ALL WITHOUT COST TO STUDENTS OR THE SCHOOLS. "IS IT A FIDDLE OR A VIOLIN?" IS A UNIQUE PARTNERSHIP WITH THE COUNTRY MUSIC HALL OF FAMES® AND MUSEUM, IN WHICH STUDENTS ARE INVITED TO EXPLORE THE SIMILARITIES AND THE DIFFERENCES BETWEEN CLASSICAL MUSIC AND COUNTRY MUSIC.</p> <p>ALONG WITH PERFORMING FOR STUDENTS, THE NASHVILLE SYMPHONY COMMITS ITS TIME AND RESOURCES TO PERFORMING FREE CONCERTS FOR PEOPLE FROM ACROSS THE COMMUNITY. EVERY SUMMER, THE REGIONS COMMUNITY CONCERTS SERIES BRINGS THE ORCHESTRA TO PUBLIC PARKS ACROSS THE CITY AND THE MID-STATE REGION, CULMINATING IN A FOURTH OF JULY CELEBRATION IN DOWNTOWN NASHVILLE THAT ANNUALLY ATTRACTS TENS OF THOUSANDS OF PEOPLE. IN ADDITION, EVERY JANUARY, THE SYMPHONY PRESENTS "LET FREEDOM SING!," A FREE MUSICAL CELEBRATION OF THE LIFE AND LEGACY OF MARTIN LUTHER KING JR., AT SCHERMERHORN SYMPHONY CENTER. EACH YEAR, SCHERMERHORN SYMPHONY CENTER ALSO HOSTS THE REGIONS FREE DAY OF MUSIC, WHICH FEATURES MORE THAN TWO DOZEN PERFORMANCES DURING A SINGLE DAY. THE GOAL OF THIS POPULAR EVENT, WHICH IS FREE OF CHARGE ALL DAY LONG AND TYPICALLY REACHES MORE THAN 5,000 PEOPLE, IS TO MAKE THE SCHERMERHORN ACCESSIBLE TO THE ENTIRE COMMUNITY AND TO PROVIDE A WELL-ATTENDED FORUM FOR THE PARTICIPATING MUSICAL ENSEMBLES, WHICH REPRESENT A WIDE ARRAY OF GENRES.</p> <p>OTHER COMMUNITY ENGAGEMENT EFFORTS INCLUDE ONSTAGE AT THE SCHERMERHORN, WHICH OFFERS ADULT PARTICIPANTS AN OPPORTUNITY TO INTERACT WITH NASHVILLE SYMPHONY MUSICIANS IN AN INFORMAL SETTING ON THE SYMPHONY CENTER STAGE, AND OFFSTAGE, WHICH TAKES SYMPHONY MUSICIANS INTO WORKPLACES, COMMUNITY CENTERS, RESIDENCES FOR THE ELDERLY AND HEALTH-CARE FACILITIES FOR INTERACTIVE PRESENTATIONS.</p>
FORM 990, PART VI, SECTION B, LINE 11B	REVIEW OF FORM 990 BY GOVERNING BODY	<p>IN JANUARY 2012, THE AUDIT COMMITTEE REVIEWED A DRAFT OF THE FORM 990 (INCLUDING SUPPLEMENTAL SCHEDULES). THIS REVIEW INCLUDED A BOARD PRESENTATION BY THE ORGANIZATION'S TAX PREPARER TO HIGHLIGHT THE SIGNIFICANT AREAS ON THE REDESIGNED FORM 990 AND SUPPLEMENTAL SCHEDULES. THE FORM 990 (INCLUDING SUPPLEMENTAL SCHEDULES) AS ULTIMATELY FILED WITH THE IRS WAS PROVIDED TO THE GOVERNING BODY IN JANUARY 2012.</p>

Return Reference	Identifier	Explanation						
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY	<p>THE NASHVILLE SYMPHONY'S CONFLICT OF INTEREST POLICY COVERS ALL EMPLOYEES, OFFICERS, DIRECTORS, TRUSTEES, OR ANY OTHERS IN A FIDUCIARY RELATIONSHIP WITH THE NASHVILLE SYMPHONY AND IS ADMINISTERED BY THE EXECUTIVE COMMITTEE. AT LEAST ONCE PER YEAR, THE EXECUTIVE COMMITTEE WILL ADVISE THE BOARD OF ANY SIGNIFICANT EVENTS WHICH RELATE TO THE POLICY.</p> <p>CONFLICTS WHICH ARE NOT DISCLOSED TO A COMMITTEE OR TO THE BOARD OF DIRECTORS IN APPROVING SYMPHONY ACTION ARE TO BE REPORTED TO THE PRESIDENT AND CEO OF THE SYMPHONY OR TO A MEMBER OF THE EXECUTIVE COMMITTEE SO THAT AN INDEPENDENT DETERMINATION CAN BE MADE OF THE SITUATION. ANY SYMPHONY FIDUCIARY OR SYMPHONY EMPLOYEE WHO FEELS THAT HE OR SHE MAY HAVE A CONFLICT OF INTEREST OR BE AWARE OF A CONFLICT SITUATION, ACTUAL, POTENTIAL OR PERCEIVED, MAY REPORT PERTINENT DETAILS TO THE PRESIDENT AND CEO OF THE SYMPHONY OR A MEMBER OF THE EXECUTIVE COMMITTEE. THE PRESIDENT AND CEO WILL BE RESPONSIBLE FOR REFERRING THE MATTER TO THE EXECUTIVE COMMITTEE OF THE SYMPHONY. THE EXECUTIVE COMMITTEE WILL REVIEW THE INFORMATION, AND INVESTIGATE IT FURTHER IF NECESSARY. IF SUCH A CONFLICT IS DETERMINED TO EXIST, THE INDIVIDUAL WITH THE CONFLICT WILL BE PROHIBITED FROM PARTICIPATING IN THE DELIBERATIONS AND DECISIONS REGARDING THE TRANSACTION IN QUESTION.</p>						
FORM 990, PART VI, SECTION B, LINE 15A	PROCESS USED TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	ANNUALLY, THE ORGANIZATION UTILIZES SURVEYS AND RESEARCH OF LOCAL, REGIONAL, AND NATIONAL ORGANIZATIONS OF SIMILAR SIZE AND MAKEUP TO ACCUMULATE FAIR AND REASONABLE COMPENSATION DATA FOR THE PRESIDENT/CEO, OFFICERS, AND OTHER KEY EMPLOYEES. THE COMPENSATION COMMITTEE REVIEWS THIS COMPENSATION DATA, AND CONSIDERS ORGANIZATIONAL SUCCESS IN RELATION TO THE BUDGET, THE STRATEGIC PLAN, AND ANY AGREED-UPON CONTRACT TERMS FOR THE PRESIDENT/CEO. DELIBERATIONS AND DECISIONS REGARDING COMPENSATION FOR THE PRESIDENT/CEO, OFFICERS AND KEY EMPLOYEES ARE RECORDED IN THE MINUTES OF THE MEETING IN WHICH SUCH DISCUSSIONS TAKE PLACE. THIS PROCESS WAS LAST UNDERTAKEN IN 2011.						
FORM 990, PART VI, SECTION B, LINE 15B	PROCESS USED TO ESTABLISH COMPENSATION OF OTHER OFFICERS/KEY EMPLOYEES	ALL OFFICERS AND KEY EMPLOYEES INCLUDED IN THE COMPENSATION REVIEW WERE AS FOLLOWS: MUSIC CONDUCTOR, GENERAL MANAGER, VP OF EXTERNAL AFFAIRS, CFO, VP OF EDUCATION, VP OF HUMAN RESOURCES, VP OF ARTISTIC ADMINISTRATION. THIS PROCESS WAS LAST UNDERTAKEN IN 2011.						
FORM 990, PART VI, SECTION C, LINE 19	PUBLIC DISCLOSURE	FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICIES ARE NOT REQUIRED DISCLOSURES PURSUANT TO INTERNAL REVENUE CODE (IRC) SECTION 6104. THESE DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC AT THIS TIME.						
FORM 990, PART XI, LINE 5	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1"> <thead> <tr> <th>(a) Description</th> <th>(b) Amount</th> </tr> </thead> <tbody> <tr> <td>NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS</td> <td>1,461,038</td> </tr> <tr> <td>CHANGE IN FAIR VALUE OF DERIVATIVE INSTRUMENT</td> <td>1,148,579</td> </tr> </tbody> </table>	(a) Description	(b) Amount	NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS	1,461,038	CHANGE IN FAIR VALUE OF DERIVATIVE INSTRUMENT	1,148,579
(a) Description	(b) Amount							
NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS	1,461,038							
CHANGE IN FAIR VALUE OF DERIVATIVE INSTRUMENT	1,148,579							