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.

OMB No. 1545-0047
2006
25000
Open to Public
Inspection

A	For th	ne 2006 calendar year, or tax year beginning 8/1/2006 , and ending 7/31/2	2007	TOTAL TOTAL CONTRACTOR OF THE PROPERTY OF THE
			D Emplo	yer identification number
_			62	0550979
_	Name c	print or Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Teleph	none number
_	nitial re	See 1 Symphony Place	(615	687-6515
	Final ret	Specific City and the analysis and ZID 4		ing method: Cash 🗸 Accrual
_		tions. Nashville, TN 37201-2031		ther (specify)
=				e to section 527 organizations.
	, ,	trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group of the street	•	n for affiliates? Yes No
G '	Websit	e: ▶ nashvillesymphony.org H(c) Are all affili		
J	Organiz	zation type (check only one) ► 🗹 501(c) (3) < (insert no.) 🗌 4947(a)(1) or 📗 527 (If "No," att	ach a lis	t. See instructions.)
		here ► if the organization is not a 509(a)(3) supporting organization and its gross H(d) Is this a sep	arate retu	rn filed by an by a group ruling? Yes No
		are normally not more than decided. It reterm to not required, but it is organization discount.		
	io ille a			
1 1	Gross			the organization is not required form 990, 990-EZ, or 990-PF).
		Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the		
B.H.	_		n loti u	
	1	Contributions, gifts, grants, and similar amounts received: Contributions to donor advised funds 20,035,370		
	a	Contributions to donor advised fames		
	b	Direct public support (not included of line 14)		
	С	makect public support (not included on line ray	- 4.7 ' ' ' '	
	d	Government contributions (grants) (not included on line 1a) 1d 505,677		00 544 047
	е	Total (add lines 1a through 1d) (cash \$ 20,541,047 noncash \$ 0) .	1e	20,541,047
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	7,244,028
	3	Membership dues and assessments	3	0
	4	Interest on savings and temporary cash investments	4	420,999
	5	Dividends and interest from securities	5	5,777,082
	6a	Gross rents		
	b	Less: rental expenses		
		Net rental income or (loss). Subtract line 6b from line 6a	6c	-373,819
m	7	Other investment income (describe See Statement 1)	7	1,865,280
Revenue	8a	Gross amount from sales of assets other (A) Securities (B) Other	1 164 TE	
eve	0.1	than inventory 0 8a 0		
<u>m</u>	b	Less: cost or other basis and sales expenses. 0 8b 0		
	l	Gain or (loss) (attach schedule) 0 8c 0		
		Net gain or (loss). Combine line 8c, columns (A) and (B)	8d	0
	9	Special events and activities (attach schedule). If any amount is from gaming, check here		See Statement 2
	_	Gross revenue (not including \$ 0 of		
	a	contributions reported on line 1b) 9a 2,877,367		
	b	Less: direct expenses other than fundraising expenses . 9b 2,418,333	\$154 CO 15 AV-	
	1	Net income or (loss) from special events. Subtract line 9b from line 9a	9c	459,034
		Gross sales of inventory, less returns and allowances Stmt 3 10a 146,686	1000	
	10a	areas saids of inventory, loss fatarite and anovarious said		
	b	Less: cost of goods sold	10c	65,359
	11	Other revenue (from Part VII, line 103)	11	0
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	35,999,010
			13	27,455,985
S	13	Program services (from line 44, column (B))	14	4,561,388
Expenses	14	Management and general (from line 44, column (C))	15	1,765,532
xbe	15	Fundraising (from line 44, column (D))		1,705,532
诃	16	Payments to affiliates (attach schedule)	16	
	17	Total expenses. Add lines 16 and 44, column (A)	17	33,782,905
ets	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	2,216,105
ASS	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	111,746,596
Net Assets	20	Other changes in net assets or fund balances (attach explanation) Stmt 4		2,213,493
Z	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	116,176,194

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
2a	Grants paid from donor advised funds (attach schedule)			·		
	(cash \$ noncash \$)	22a	o	0		
7h	If this amount includes foreign grants, check here	220		0		
20	Other grants and allocations (attach schedule) (cash \$ noncash \$)					
	If this amount includes foreign grants, check here	22b	0	0		
3	Specific assistance to individuals (attach					
3	schedule)	23	0	o		
4	Benefits paid to or for members (attach			-		
	schedule)	24	0	0		
5a	Compensation of current officers, directors,					
	key employees, etc. listed in Part V-A					
		25a	0	0	0	0
b	Compensation of former officers, directors,					
	key employees, etc. listed in Part V-B					
		25b	0	0	0	0
С	Compensation and other distributions, not included above, to					
	disqualified persons (as defined under section 4958(f)(1)) and			_		
	persons described in section 4958(c)(3)(B)	25c	0	0	0	0
6	Salaries and wages of employees not included	00	12 140 E00	40 400 404	4 070 000	
_	on lines 25a, b, and c	26	13,140,598	10,408,194	1,872,266	860,138
7	Pension plan contributions not included on	27	212 722	242 700		_
	lines 25a, b, and c	21	313,722	313,722	0	0
3	Employee benefits not included on lines 25a - 27	28	775,836	460,696	222.262	00.770
)		29	756,525	554,358	232,362 150,151	82,778
)	Payroll taxes	30	131,933	0	130,131	52,016
	Accounting fees	31	28,171	0	28,171	131,933
	Legal fees	32	28,485	0	28,485	
	Supplies	33	74,216	18,693	44,523	11,000
	Telephone	34	49,463	0	49,463	0
5	Postage and shipping	35	173,547	131,074	10,658	31,815
	Occupancy	36	587,284	434,132	153,152	0
7	Equipment rental and maintenance	37	341,613	280,397	61,216	0
	Printing and publications	38	362,370	278,786	47,308	36,276
	Travel	39	74,964	33,921	39,113	1,930
)	Conferences, conventions, and meetings	40	89,347	28,468	50,988	9,891
	Interest	41	4,085,406	4,085,406	0	0
	Depreciation, depletion, etc. (attach schedule)	42	6,660,559	6,660,559	0	0 Str
	Other expenses not covered above (itemize):					
а.	See Statement 6	43a	6,108,866	3,767,579	1,793,532	547,755
b.		43b				<u>.</u>
		43c				
		43d				
		43e 43f				
		43g				
_	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	33,782,905	27 455 095	4 564 200	4.705.500
	Costs. Check ► ☐ if you are following SOP 9		00,102,300	27,455,985	4,561,388	1,765,532

Form 990 (2006) Part III Statement of Program Service Accomplishments (See the instructions.) Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments. What is the organization's primary exempt purpose? The Nashville Symphony Association is dedicated t Program Service All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.) of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) a See Statement 7 (Grants and allocations If this amount includes foreign grants, check here (Grants and allocations) If this amount includes foreign grants, check here (Grants and allocations If this amount includes foreign grants, check here

If this amount includes foreign grants, check here

) If this amount includes foreign grants, check here \blacktriangleright

(Grants and allocations

(Grants and allocations

e Other program services (attach schedule)

Total of Program Service Expenses (should equal line 44, column (B), Program services).

27,455,985 Form 990 (2006)

L	env	Balance Sheets (See the instruction.	s <i>.)</i>				
	Note:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	s within th	e description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing			2,791,103	45	2,925,154
	46	Savings and temporary cash investments .			3,628,758		
	47a	Accounts receivable	47a	357,430			
		Less: allowance for doubtful accounts .	47b	60,000	307,135	47c	297,430
		Di i		6 -			•
	1	Pledges receivable Less: allowance for doubtful accounts	48a 48b	25,689,721 600,000	29,333,886	40-	05.000 =0.0
	49	Cronto vancius Lie			29,333,866		25,089,721
	50a	Receivables from current and former officers	s, directo	ors, trustees, and			
		key employees (attach schedule)			0	50a	0
	b	Receivables from other disqualified persons 4958(f)(1)) and persons described in section 4958	(as defin 58(c)(3)(B)	ed under section (attach schedule)	0	50b	ń
	51a	Other notes and loans receivable (attach					
ets		schedule)	51a	0			
Assets	b	Less: allowance for doubtful accounts .	51b	0	0	51c	0
•	52	Inventories for sale or use			0	52	0
	53	Prepaid expenses and deferred charges .			2,362,350		1,940,765
		Investments—publicly-traded securities Investments—other securities (attach schedu			65,467,100	54a	75,061,246
			ile) 🚩	L Cost L FMV	0	54b	0
		equipment: basis	55a	0			
	b	Less: accumulated depreciation (attach schedule)	55b	o	0	55c	0
	56	Investments—other (attach schedule)			0	56	0
	57a	Land, buildings, and equipment: basis .	57a	132,479,900			
	b	Less: accumulated depreciation (attach	57b	6 005 627	422 507 450	-7,73.	
	58	schedule) Stmt 8		6,905,637	123,507,158	57c	125,574,263
)	3,233,976	58	10 257 250
	59	Total assets (must equal line 74). Add lines	45 throu	gh 58	230,631,466		10,257,350 241,145,929
	60	Accounts payable and accrued expenses .			2,710,356	60	3,565,919
	61	Grants payable			0	61	0
	62	Deferred revenue			4,174,514	62	4,403,816
lities	63	Loans from officers, directors, trustees, and	key em	ployees (attach			
iiq		schedule)			0	63	0
Liabi		Tax-exempt bond liabilities (attach schedule)			102,000,000		102,000,000
	65	Mortgages and other notes payable (attach s Other liabilities (describe ▶	cneaule)	3mir i. · ·	10,000,000	64b 65	15,000,000
				,	- U	-03	0
					118,884,870	66	124,969,735
		nizations that follow SFAS 117, check here ► 67 through 69 and lines 73 and 74.	✓ and	complete lines			
ces		Unrestricted			58,684,130	67	95 E20 470
a	68	Temporarily restricted		• • • • • •	42,248,975	68	85,538,170 19,774,847
Ba	69	Permanently restricted			10,813,491	69	10,863,177
Net Assets or Fund Balances	Orgar	nizations that do not follow SFAS 117, check					10,000,117
드		complete lines 70 through 74.					
SO		Capital stock, trust principal, or current funds				70	
set		Paid-in or capital surplus, or land, building, a Retained earnings, endowment, accumulated				71	
As		Total net assets or fund balances. Add lines				72	
et		70 through 72. (Column (A) must equal line 1	9 and co	olumn (B) must	[*		
-	6	equal line 21)			111,746,596	73	116,176,194
	74	Total liabilities and net assets/fund balances	. Add lin	es 66 and 73	230,631,466	74	241,145,929

	Reconciliation of Revenue per Ai instructions.)	udited Financial State	ements With Ro	evenue pe	r Retur	n (See the
a b	Total revenue, gains, and other support per aud Amounts included on line a but not on Part I, li	ne 12:	ts		а	38,481,78
1 2	Net unrealized gains on investments			2,213,493		
3	Donated services and use of facilities Recoveries of prior year grants		b2	269,286		
4	Other (specify):			0		
			b4	0	1.00	
	Add lines b1 through b4				b	2,482,77
C	Subtract line b from line a				С	35,999,010
d 1	Amounts included on Part I, line 12, but not on	line a:	ايدا		34.5	
2	Investment expenses not included on Part I, line Other (specify):	9 60	d1	0		
				٥		
	Add lines d1 and d2				d	ſ
e	Total revenue (Part I, line 12). Add lines c and	d		>		35,999,010
	Reconciliation of Expenses per A	udited Financial State	ements With Ex	cpenses p	er Retu	ırn
a	Total expenses and losses per audited financial	statements			a	34,052,191
b 1	Amounts included on line a but not on Part I, lin	ne 17:				
2	Donated services and use of facilities Prior year adjustments reported on Part I, line 2	· · · · · · · · · · · · · · · · · · ·	b1 b2	269,286		
3	Losses reported on Part I, line 20	·	b3	0		
4	Other (specify):					
			b4	0	4.4.1 4.4.1	
	Add lines b1 through b4				b	269,286
C	Subtract line b from line a				С	33,782,905
d 1	Amounts included on Part I, line 17, but not on I Investment expenses not included on Part I, line	ine a:	1			
2	Other (specify):	ъъ	<u>d1</u>	0		
			d2	0		
	Add lines d1 and d2				d	n
e G	Total expenses (Part I, line 17). Add lines c and	d		>		33,782,905
فاعتدا	tV-A Current Officers, Directors, Trustees or key employee at any time during the year	s, and Key Employees	(List each perso	n who was	an office	r, director, trustee,
		(B)	(C) Compensation	LIN Contribution	uctions.)	
	(A) Name and address	Title and average hours per week devoted to position	(If not paid, enter	benefit plans	& deferred	(E) Expense account and other allowances
See	Statement 12	The second of position	-0,	compensati	on pians	
						
	_			!		
						
				-		
	··········					1

	art V-A Current Officers, Directors, Trustees, a	and Key Employe	es (continued)			T	s No
75	Enter the total number of officers, directors, and trust meetings	tees permitted to vo	ote on organization	on business at board 84		Tes	, IVC
	b Are any officers, directors, trustees, or key employee employees listed in Schedule A, Part I, or higher contractors listed in Schedule A, Part II-A or II-E relationships? If "Yes," attach a statement that identi	st compensated p 3. related to each	professional and	ghest compensated other independent	1		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
(c Do any officers, directors, trustees, or key emcompensated employees listed in Schedule A, Paindependent contractors listed in Schedule A, Parorganizations, whether tax exempt or taxable, that a the definition of "related organization.". If "Yes," attach a statement that includes the information of Does the organization have a written conflict of intermediate. Former Officers, Directors, Trustees, and Key officer, director, trustee or key employee receiptions.	ployees listed in ut I, or highest count II-A or II-B, recare related to the output of the country of the country? y Employees That F	Form 990, Pa ompensated proteive compensat rganization? See 	rt V-A, or highest essional and other ion from any other the instructions for	75c 75d efits (I	f any	forme ist the
	person below and enter the amount of compens (A) Name and address (B)	Loans and Advances	(C) Compensation (if not paid,	(D) Contributions to employee benefit plans & deferred	(E	Exper	d other
			enter -0-)	compensation plans	al	llowanc	es
							<u> </u>
Harris Co.	tVI Other Information (See the instructions.)					Yes	No
76	Did the organization make a change in its activities of detailed statement of each change				76	1.5-25	<u> </u>
77 -	Were any changes made in the organizing or governing if "Yes," attach a conformed copy of the changes.				77	2.74	<u>/</u>
	Did the organization have unrelated business gross in this return?		r more during th		78a	'	
79	If "Yes," has it filed a tax return on Form 990-T for thi Was there a liquidation, dissolution, termination, or sul a statement		n during the yea		78ь		6-444
80a	Is the organization related (other than by association common membership, governing bodies, trustees,	with a statewide o officers, etc., to a	any other exem	pt or nonexempt	79 80a		<u>/</u>
b	If "Yes," enter the name of the organization ▶		• • • • • •		80a		<u>v</u>
81a	Enter direct and indirect political expenditures. (See lin Did the organization file Form 1120-POL for this year?	check whether it is	evemnt or	nonexempt 0			

	at W. Other Information (continued)			Page N
82	a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	T -	res	i N
	or at substantially less than fair rental value?	82a	~	1
	amount as revenue in Part I or as an expense in Part II.			
	(See instructions in Part III.)			
83	a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	V	
84	b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	V	<u> </u>
0-76	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		\ \ \
,	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	10.60		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	84b 85a		-
ŀ	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		+-
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
	Dues, assessments, and similar amounts from members			
C	Section 162(e) lobbying and political expenditures			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f		2 1 6 1	
_	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
n	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	0Eh	S. Bu	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	85h		7.5
b	Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other	11 4 4 3 7 4		
	sources against amounts due or received from them.)			b.j
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
	partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.			
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the	88a		
	meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	1	V
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under			
	section 4911 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction			H.J
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	001		
c	Enter: Amount of tax imposed on the organization managers or disqualified	89b		
Ū	persons during the year under sections 4912, 4955, and 4958			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization >			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction?	89e		V
Ť		89f		V
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the			
	supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		
90a	List the states with which a copy of this return is filed ▶ None			
	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)			176
91a	The books are in care of ► Karen M Warren Telephone no ► 615-6	87-65		.,,
	Located at ► 1 Symphony Place, Nashville, TN ZIP + 4 ► 37201-		 -	
b	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			No
	account)?	91b	(<u>)</u> () () () ()	<u> </u>
	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			M
	and Financial Accounts.			

GET.	Other Information (continued)						Yes N
c 92	At any time during the calendar year, did the "Yes," enter the name of the foreign council Section 4947(a)(1) nonexempt charitable transport to the approximation of the second section to the second	Intry ▶	190 in liqu of Form	4044 05		91c	
Production of the	and enter the amount of tax-exempt intere	ist received or ac	crued durina the t	ax vear	. № 1921		▶
	VII Analysis of Income-Producing	Activities (See	the instructions.,)		·	
Note	: Enter gross amounts unless otherwise	Unrelate	d business income	Excluded by se	ction 512, 513, or 514		(E)
indica 93	Program service revenue:	(A) Business co	de (B) Amount	(C) Exclusion code	(D)	exemp	lated or ot function come
a	Ticket Sales Orchestra Contract Fees					е	6,638,78
b	Other Income						373,53
C	Other income						231,70
d							
e	14 11 44 11 11						
f	Medicare/Medicaid payments						
g	Fees and contracts from government agence	cies					
94	Membership dues and assessments						
95	Interest on savings and temporary cash investme						420,999
96	Dividends and interest from securities .			14	5,777,082		
97	Net rental income or (loss) from real estate	s:					
а	debt-financed property	.					
b	not debt-financed property	532000	-805,898				432,079
98	Net rental income or (loss) from personal proper	rty					
99	Other investment income					1.	,865,280
100	Gain or (loss) from sales of assets other than invent	ory					
101	Net income or (loss) from special events						459,034
102	Gross profit or (loss) from sales of inventor						65,359
103	Other revenue: a						
b						-	
С							
d							
е							
104	Subtotal (add columns (B), (D), and (E))				5,777,082	10	486,779
105	Total (add line 104, columns (B), (D), and (E	=))			>		457,963
Note:	Line 105 plus line 1e, Part I, should equal th	ne amount on line	e 12, Part I.				101,000
Part		ccomplishment	of Exempt Purpe	oses (See the	e instructions)		
Line I	No. Explain how each activity for which inco of the organization's exempt purposes (me is reported in a	column (F) of Part VI	L contributed in	nportantly to the a	ccomp	lishment
	See Statement 13						
in the second of							
Part		bsidiaries and D	isregarded Entition	es (See the in	nstructions.)		
	(A) Name, address, and EIN of corporation,	(B) Percentage of	(C)		(D)	(E End-o	Ξ)
	partnership, or disregarded entity of	ownership interest	Nature of act	ivities	Total income	End-o	f-year
		%					
		%					
		%					
t make a special contract		%					
Part >	Information Regarding Transfers Ass	ociated with Per	sonal Benefit Con	tracts (See th	e instructions)		
(a)	Did the organization, during the year, receive any funds, Did the organization, during the year, pay pre: If "Yes" to (b), file Form 8870 and Form 4	directly or indirectly,	to pay premiums on a p	nersonal henofit	contract? .		☑ No ☑ No
	1. 77 3.11. CO. C LINE I OIII 4	יבס ושכני וושנוענוו	0113].	·			

Part		Transfers To and Frontion as defined in section	m Controlled n 512(b)(13).	Entities. Cor	mplete only if the o	rganiz	Page Zatioi
106	Did the reporting organization n the Code? If "Yes," complete the	nake any transfers to a cor ne schedule below for each	ntrolled entity a controlled enti	s defined in se	ection 512(b)(13) of	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Des	(C) cription of ransfer	(D Amount of		fer
а							
b		-					
С							
	Totals						
107	Did the reporting organization re 512(b)(13) of the Code? If "Yes,"	ceive any transfers from a complete the schedule be	controlled enti	ty as defined in	n section	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desc	(C) ription of ansfer	(D) Amount of	transfe	er
а				· ·			
b							
С							
	Totals						
108	Did the organization have a binding rents, royalties, and annuities des	cribed in question 107 abo	ve?		g the interest,		Ν̈́ο
Please Sign Here	Under penalties of perjury, I declare that I and belief, it is true, correct, and complete Signature of officer Michael Kirby, CFO Type or print name and title	have examined this return, including the Declaration of preparer (other the Declaration of preparer to the Declaration of preparer to the Declaration of preparer (other the Declaration of preparer to the Declaration of the Declarat	g accompanying so nan officer) is based	chedules and stater d on all information Dat	of which preparer has any $\frac{207}{2007}$	y knowle	edge edge.
aid reparer's	Preparer's signature Firm's name (or yours)		Date	Check if self- employed ▶ □	Preparer's SSN or PTIN (Sec	e Gen. In	st. X)
lse Only	if self-employed), address, and ZIP + 4			EIN Phone n	▶		

Form **990** (2006)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2006

NASHVILLE SYMPHONY ASSOCIATION

Employer identification number 62 0550979

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 of the instructions. List each one. If there are none, enter "None.")

		o momo, criter	NONG. J	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other
Alan D Valentine			deletted compensation	allowances
1 Symphony Place, Nashville, TN 37201-2031,	Exec Director/CEO 40	300,000	12.000	26 600
Edward DeDee			12,000	26,600
1 Symphony Place, Nashville, TN 37201-2031,	Vice President 40	170,000	10,200	٥
Susan Plageman			10,200	
1 Symphony Place, Nashville, TN 37201-2031,	Vice President 40	160,000	9,600	0
Michael Buckland			3,000	
1 Symphony Place, Nashville, TN 37201-2031,	Vice President 40	136,000	8,160	0
Mark Blakeman			0,100	
1 Symphony Place, Nashville, TN 37201-2031,	Vice President 40	129,000	7,740	0
Total number of other employees paid over \$50,000 .	54			William Wall Day on

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none enter the

(See page 2 of the instructions, List each one (whether in	idividuals or firms). If there are no	ne, enter "None.")
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Bradford Group		(o) compansation
1130 8th Avenue South Ste 108, Nashville, TN 37203, US	PR Consultant	170.022
ArtsVision		170,923
6 Libera Court, Rhinebeck, NY 12572, US	Education Consulting	126 776
Community Counseling Services		136,776
PO Box 27462, NY, NY 10087-7462, US	Fundraising Consulta	100 050
Ruder Finn		122,652
301 East Fifty-Seventh Street, NY, NY 10022, US	PR Consultant	70.040
Strategy Group		73,646
1024 A 18th Avenue South, Nashville, TN 37212, US	PR Consultant	65 500
Total number of others receiving over \$50,000 for		65,529
professional services		
U C		Same della di la compositionale della compositiona della compositiona della compositiona della compositiona della

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

Total number of other contractors receiving over \$50,000 for other services		
MSC 410628, Nashville, TN 37241, US	Architect	166,804
Earl Swenson Associates		330,370
5200 Granny White Pike, Nashville, TN 37220, US	Media Production	358,970
Sunrise International		386,733
4001 Industrial Way, Benicia, CA 94510, US	Organ Designer	200 700
Schoenstein Co		1,239,338
209 Powell Place, Brentwood, TN 37027, US	Office Furniture Providers	4 220 220
Interior Design Services		3,030,301
PO Box 120129, Nashville, TN 37212, US	Building Construction	9,658,301
American Constructors Inc	(a) type of edivide	(c) Compensation
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
nitris. If there are none, enter None. See page 2 of ti	ne instructions.)	

	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$\bigsim \bigsim	1_		v
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	-		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property?	2a		V
d	Lending of money or other extension of credit?	2b		V
С	Furnishing of goods, services, or facilities?	2c		v
đ	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		v
е	Transfer of any part of its income or assets?	2e		v
3а	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		v
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	V	
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3с		v
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3d		<u> </u>
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		V
b	Did the organization make any taxable distributions under section 4966?	4b		V
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		<u> </u>
d	Enter the total number of donor advised funds owned at the end of the tax year			
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year •			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			_0

An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general pt 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and g from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33½% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwis requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III—Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (see Amou								
A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital and state ▶ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general put 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A norganization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and g from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33½% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwis requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) Is the supported Amou								
A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital' and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general put 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33%% of its support from contributions, membership fees, and g from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33%% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acc organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwis requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) Is the supported Amou								
A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital' and state ▶ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general put 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and g from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33½% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwis requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d								
9								
An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the Support Schedule in Part IV-A.) 11a								
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An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and g from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33½% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amounted the Supported Amounted III-Other Type III-Other Type III-Other Type of Is the supported Amounted III-Other								
An organization that normally receives: (1) more than 331/2% of its support from contributions, membership fees, and g from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/2% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amount	ublic. Sectior							
from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amount of the supported organization (see page 7 of the instructions.)								
An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwis requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type I Type II Type III-Functionally Integrated Type III-Other Provide the following information about the supported organizations. (See page 7 of the instructions.) (a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amount	of ito ouronad							
(a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amou	se meets the							
(a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amou								
identification number (EIN) number (EIN) identification organization organization the supporting organization's shown or IRC section organization organization listed in supporting organization's governing documents?	e) unt of port							
Yes No								
otal								
4	0							

No	Support Schedule (Complete on te: You may use the worksheet in the instructions	ly if you checked s for converting fro	a box on line 10,	, 11, or 12.) Use	cash metho	od of	accounting.
Ca	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 200		(e) Total
15	Gifts, grants, and contributions received. (Do			(-,	(5) 200		(c) rotar
	not include unusual grants. See line 28.).	5,780,737	7,041,124	5,198,753	7,168	010	25 100 522
16	Membership fees received	0	0	0,100,133	7,100	0	25,188,632
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	5,577,522	2,760,071	2,824,040	3,051		14,213,377
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	514,601	427,468	418,285			
19	Net income from unrelated business	31,,001	721,700	410,203	451,	,033	1,811,987
	activities not included in line 18	0	o				
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.	0		0		0	0
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0	0	0		0	0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	13,489	1,715	44,407	40		0
23	Total of lines 15 through 22	11,886,349	10,230,378			866	102,477 St
24	Line 23 minus line 17			8,485,485	10,714,		41,316,473
25	Enter 1% of line 23	6,308,827	7,470,307	5,661,445	7,662,		27,103,096
		118,863	102,304	84,855	107,	143	
26	Organizations described on lines 10 or 11:	a Enter 2% of a	mount in column	(e), line 24	> _:	26a	
ь	Prepare a list for your records to show the name governmental unit or publicly supported organization amount shown in line 26a. Do not file this list with Total support for section 509(a)(1) test: Enter line	ation) whose total t h your return. Ent	gifts for 2002 thr er the total of all t	ough 2005 exceethese excess amo	eded the	26b	
d	Add: Amounts from column (e) for lines: 18 _	1 2	9		2.1	26c	() 12.15 회사 회사 (12.5) 신경인 () 12.15 발전 (17.5)
e f	Public support (line 26c minus line 26d total) .				> 2	26d 26e	
27	Organizations described on line 12: a For person," prepare a list for your records to show the Do not file this list with your return. Enter the	amounts include he name of, and to sum of such amo	d in lines 15, 16 tal amounts rece unts for each ye	, and 17 that we lived in each year ar:	ere received from, each	"disqu	ualified person."
	(2005) 4,375 (2004)	4,375	(2003)	4,125	(0000)		1,670
b	For any amount included in line 17 that was receive show the name of, and amount received for each ye (Include in the list organizations described in lines 5 the difference between the amount received and the amounts) for each year:	ed from each person ear, that was more through 11b, as we he larger amount of	on (other than "dis than the larger of Il as individuals.) E lescribed in (1) or	qualified persons' (1) the amount or loo not file this list (2), enter the sur	"), prepare a n line 25 for t c with your re n of these d	list for the yea e turn. lifferen	r your records to ar or (2) \$5,000. After computing aces (the excess
	(2005)	0	(2003)	0	(2002)	•	0
С	Add: Amounts from column (e) for lines: 15		6	— .	. 10	7c	39,402,009
d							
e		nd line 27b total		- · · · ·	· · • 2	7d	14,545
	Public support (line 27c total minus line 27d total	11)				7e	39,387,464
f	Total support researches (line 87- /unio	ount from line 23,	column (e)	▶ 2/† 41.	,316,473	. 1	
g h	Public support percentage (line 27e (numerate	or) divided by line	27f (denomina	tor))	▶ 2	7g	95 %
	Investment income percentage (line 18, colum					7h	4 %
28	Unusual Grants: For an organization described prepare a list for your records to show, for each description of the nature of the grant. Do not file	n vear, the name o	of the contributor	r the date and a	mount of th	20 050	through 2005, int, and a brief

ETTAV	Private School Questionnaire (See page 9 of the instructions.)
	(To be completed ONLY by schools that checked the hox on line 6 in Part IV

29	other governing instance a residualy hondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?			
	IT "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff?	200		
ŀ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32a 32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement)	32d		
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b	_	
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e f	Educational policies?	33e		
g	Athletic programs?	33f 33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	\perp	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		n

E	Art VI-A Lobbying Expenditures by	Electing Publi	c Charities (S	ee page 10	of th	e instru	uctions	Page S.)
Cł	(To be completed ONLY by neck ▶ a ☐ if the organization belongs to an aff	an engible orga	anization that f	iled Form 5	768)			
_				if you checked	l "a" ar	nd "limited	d contro	l" provisions apply.
	Limits on Lobby (The term "expenditures" me					Affiliate	a) d group als	(b) To be completed for all electing
36					26			organizations
37	Total lobbying expenditures to influence a leg	rislative body (dir	rect lobbying)	· · · ·	36			
38	Total lobbying expenditures (add lines 36 and	d 37)	cor lobbyling)		38			
39	Other exempt purpose expenditures			• • •	39			
40	Total exempt purpose expenditures (add line	s 38 and 39)		• • •	40			
41	Lobbying nontaxable amount. Enter the amou	unt from the follo	wing table—	• • •				
	If the amount on line 40 is— The	lobbying nontax	cable amount is-					
	Not over \$500,000 20%	of the amount of	n line 40	1				
	Over \$500,000 but not over \$1,000,000 . \$100	0,000 plus 15% of	the excess over \$	500.000				
	Over \$1,000,000 but not over \$1,500,000 . \$175	5,000 plus 10% of t	he excess over \$1.	.000.000	41			
	Over \$1,500,000 but not over \$17,000,000 . \$225	,000 plus 5% of th	ne excess over \$1,	,500,000				
40	Over \$17,000,000	00,000]	1.			
42 43	Grassroots nontaxable amount (enter 25% of	line 41)			42			
43	Subtract line 42 from line 36. Enter -0- if line	42 is more than I	ine 36		43			
-1-4	Subtract line 41 from line 38. Enter -0- if line	41 is more than I	ine 38		44			
	Caution: If there is an amount on either line 4	3 or line 44, you	must file Form 4:	720.				
		eraging Perio						
	(Some organizations that made a section See the instructions	on 501(h) election	do not have to	complete all	of the uctions	five colu s.)	ımns b	elow.
		Loi	obying Expendite	ures During	4-Yea	r Averaç	jing Pe	eriod
	Calendar year (or	(a)	(b)	(c)		(d)		(e)
	fiscal year beginning in) ▶	2006	2005	2004		200		Total
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
49	Grassroots ceiling amount (150% of line 48(e))							
50	Grassroots lobbying expenditures							
Pa	t VI-B Lobbying Activity by Nonelec	ting Public Cl	narities				1	
Duri	(For reporting only by organiza	tions that did i	not complete i	Part VI-A) (S	See pa	age 13	of the	instructions.)
atter	ng the year, did the organization attempt to influnt to influnce public opinion on a legislative materials.	ence national, sta natter or referende	ate or local legislands. Jm, through the t	ation, includiouse of:	ng any	Yes	No	Amount
a	Volunteers							
р	Paid staff or management (Include compensation	on in expenses re	ported on lines o	through h.)		.		
C	Media advertisements					.		
d d	Mailings to members, legislators, or the public					.		
e f	Publications, or published or broadcast stateme	ents				.		
g	Grants to other organizations for lobbying purpo	uses		• . • • •				
h	Direct contact with legislators, their staffs, gove Rallies, demonstrations, seminars, conventions,	EDAOCHOO ITT	or a legislative bo	ody		-		
i	Total lobbying expenditures (Add lines c through	h h.)						0
	If "Yes" to any of the above, also attach a state	inent giving a de	tailed description	of the lobby	ing ac	tivities.		

Pality		on Regarding Irganizations (S	Transfers To and Trans See page 13 of the instruct	sactions and ions.)	Relationships	With None	chari	table
30	ric) of the code (o	ther than section :	or indirectly engage in any of ti 501(c)(3) organizations) or in se	ction 527, relating	any other organiza to political organiz	tion describe ations?		
			on to a noncharitable exempt or	ganization of:			Yes	No
-	•					51a(i)		V
	i) Other assets .	- · · · · ·		· · · · ·		a(ii)	ļ	~
	ther transactions:					ļ		
	i) Sales or exchang	ges of assets with	a noncharitable exempt organi	zation		b(i)		~
(ii) Purchases of ass	sets from a nonch	aritable exempt organization .			b(ii)		V
(iii	Rental of facilitie	s, equipment, or c	other assets			b(iii)	L	V
(iv) Reimbursement	arrangements .				b(iv)	L	V
(v) Loans or loan gu	arantees				b(v)		V
			ership or fundraising solicitation			b(vi)		V
c Sh	aring of facilities, e	quipment, mailing	lists, other assets, or paid emp	lovees		С		V
go	003, Ulliel assets, t	Ji Selvices divell (," complete the following schedu by the reporting organization. If in column (d) the value of the go	the organization	received loce then	foir mouleat	value i	of the
(a)	(b)		(c)			·		
Line no.	Amount involved	Name of nor	ncharitable exempt organization	Description of t	(d) transfers, transactions, a			
				Bescription of	ransiers, transactions, a	and snaring arra	ngeme	nts
				 				
	ļ							
								
des	cribed in section 50 Yes," complete the)1(c) of the Code (ne or more tax-e in section 527?	empt organization	ns ▶ ☐ Yes		No
	(a) Name of organiza	ation	(b)		(c)			
	Traine of organize	40011	Type of organization		Description of relation	ınship		
				 				
				 				
				-				·
								
· · · · · · · · · · · · · · · · · · ·								

Form: 990 Page: 1 Part: 1 Question: 7

NASHVILLE SYMPHONY ASSOCIATION

62-0550979

Other Investment Income

Description	Amount
Distribution of Investment Earnings from a non-controlled endowment via Community Found of Mid TN	\$1,865,280.00
Total:	\$1,865,280.00

Form: 990 Page: 2 Part: II Question: 42 NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Depreciation and Depletion

Asset	Current Deprec.
Musical Instruments -Non Depreciable	\$0.00
Organ - Unfinished	
Art & Decor - Non- Depreciable	\$0.00
Musical Instruments	\$0.00
Office Funiture/Equip/Archives	\$6,701.00
Stage/Performance Equip	\$234,628.00
Auditorium/Theatrical	\$23,731.00
Vehicles	\$1,264,188.00
Kitchen Equipment	\$938.00
Front of House	\$247,492.00
	\$427,914.00
IT/Computers	\$375,478.00
Building Systems	\$1,790,984.00
Roof & Related	\$59,676.00
Land	\$0.00
Building	\$1,359,999.00
Exterior Features	\$868,830.00
otal	\$6,660,559.00

Form: 990 Page: 2 Part: II Question: 43

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Attachment listing other expenses for Part II

Description	Total:	Pgm Services	Mgt and General	Fundrasing
Other Building Operations expenses Other miscellaneous expenses Other Non-cash expenses Construction related expenses	\$963,926.00 \$3,204,908.00 \$1,311,925.00 \$628,107.00	\$0.00 \$1,827,547.00 \$1,311,925.00 \$628,107.00	\$963,926.00 \$829,606.00 \$0.00 \$0.00	\$0.00 \$547,755.00 \$0.00 \$0.00
Total:	\$6,108,866.00	\$3,767,579.00	\$1,793,532.00	\$547,755.00

Form: 990 Page: 3 Part: III Question:

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Program Services

Achievement

Pgm. Svc. Exp.

Arts, Culture & Humanities Programs, General/Other: The Nashville Symphony performed 134 concerts and \$27,455,985.00 performances for the year ending, July 31, 2007. (175000 Viewers of educ. & community concerts)

Grants and Allocations:

\$0.00 This amount includes foreign grants: N/A

Total:

\$27,455,985.00

Form: 990 Page: 4 Part: IV Question: 57 NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Schedule of Land, Buildings and Equipment

Description	Cost	Depreciation	Book Value
Land, Buildings & Equipment	\$132,479,900.00	\$6,905,637.00	\$125,574,263.00
Total:	\$132,479,900.00	\$6,905,637.00	\$125,574,263.00

Form: 990 Page: 4 Part: IV Question: 58

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Other Assets

Asset Description	BOY Amount	EOY Amount
Fair value of derivative instruments & Bond Issuance Costs	\$3,233,976.00	\$10,257,350.00
Total:	\$3,233,976.00	\$10,257,350.00

Form: 990 Page: 4 Part: IV Question: 64a

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Tax Exempt Bond Liabilities

Purpose:

Construction of a concert hall

Issue Date: Original Amount: 01/08/2004 \$102,000,000.00

Amount of issue outstanding:

\$102,000,000.00

Unexpended Proceeds:

\$0.00 No

Facility used by 3rd Party: Percent used by 3rd Party:

Obligation is a Mortgage:

No

Maturity Date: Repayment Terms:

Security Provided by Borrower: Contingent Liability:

Interest Rate:

No

If 'Yes', this record will not be included in the total

returned to the Form 990:

Total Due:

\$102,000,000.00

Statement 11 Form: 990 Page: 4 Part: IV Question: 64b

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Mortgages and Other Notes Payable

Type:

Non-Mortgage

Lender's Name:

The Community Foundation of Middle Tennessee

Original Amount: Balance Due:

\$15,000,000.00 \$15,000,000.00

Date of Note: Maturity Date:

09/16/2005 11/01/2033

Repayment Terms:

\$15 million/27yrs/7.5apr

Interest Rate: 7.5

Security Provided by Borrower:

Unsecured subordinated note

Purpose of Loan: Description of Consideration: Construction of a new concert hall

FMV of Consideration:

Unsecured subordinated note due November 1, 2033 \$15,000,000.00

Relationship:

Holder

Total Due:

\$15,000,000.00

Form: 990 Page: 5 Part: V Question:

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Officers, Directors, Trustees, and Key Employees

Name and	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Robert Arr	nett	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1: Addr 2:	515 Bel Air Place				
CSZ:	Brentwood, TN 37027				
	United States				
Julian Bake	er Jr	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	1 Symphony 1 lace				
CSZ:	Nashville, TN 37201-2031				
Country:	United States		•		
Kenneth Ba	arnd	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	212 Brown Owl Road				
Addr 2:					
CSZ:	Fairview, TN 37062				
Country:	United States				
Russell Bat	es	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	- 5				
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
.ee Beamar	ı	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	1525 Broadway				
Addr 2:	, one of the second of the sec				
CSZ:	Nashville, TN 37203				
Country:	United States				
ames Beck	ner	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	. ojimphonj i lado				
CSZ:	Nashville, TN 37201-2031		1		
Country:	United States				
- 3					

Name and	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Thomas BI	ack	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
Julie Boehr	n	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	202 Burlington Place				
Addr 2:					
CSZ:	Nashville, TN 37215				
Country:					
Dennis Bot	torff	0	\$0.00	\$0.00	\$0.00
		•	40.00	Ψ0.00	Ψ0.00
Title:	Board member				
Addr 1:	Suite 415				
Addr 2:					
CSZ:	Nashville, TN 37201				
Country:	United States				
Theophilus	Boyd III	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	· cymphony · laco				
CSZ:	Nashville, TN 37201-2031				
Country:					
Richard Bra	icken	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	Building 1-4W				
Addr 2:					
CSZ:	Nashville, TN 37203				
Country:	United States				
Vielissa Buf	fington	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	1 Gaylord Drive				
Addr 2:	1 Gaylold Drive				
CSZ:	Nachville TN 27244				
Country:	Nashville, TN 37214 United States				
/irginia Byrı	n	0	\$0.00	\$0.00	\$0.00
T111 :	December 1			•	
Title:	Board Member				
Addr 1: Addr 2:	1 Symphony Place				
CSZ:	Nashville, TN 37201-2031				
-	· , · · · · · · · · · · · · · · · · · ·				

Country	. United Chairs	Ave. Hrs/week	Comp.	Benefits	Expenses
	: United States				
Charles C	agle	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	201 4th Ave North				
Addr 2:					
CSZ:	Nashville, TN 37219				
Country	: United States				
Edwin Cra	awford	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	211 Commerce Street				
Addr 2:					
CSZ:	Nashville, TN 37201				
Country:	United States				
Greg Daily		0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	40 Burton Hills				
Addr 2:	To Button Thins				
CSZ:	Nashville, TN 37215				
Country:					
William Dov	wney	0	\$0.00	\$0.00	\$0.00
Till			• • • • •	40.00	ψ0.50
Title:	Board member				
Addr 1: Addr 2:	10 Cadillac Drive				
CSZ:	Brentwood, TN 37027				
Country:					
lichael Dy	9	0	\$0.00	\$0.00	\$0.00
Title:	Board member			•	
Addr 1:	1 Terminal Drive				
Addr 2:					
CSZ:	Nashville, TN 37214				
Country:	United States				
lichael Edv	wards	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	511 Union Street				
Addr 2:					
CSZ:	Nashville, TN 37219				
Country:	United States				
onstance E	Ely	. 0	\$0.00	\$0.00	\$0.00
	Board Member				40.00
Title:	DOALD MEILINEL				
Title: Addr 1:	1 Symphony Place				

Name and	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
CSZ: Country:	Nashville, TN 37201-2031 United States				
David Ewir	ng	. 0	\$0.00	\$0.00	\$0.00
Title: Addr 1: Addr 2: CSZ:	Board Member 1 Symphony Place Nashville, TN 37201-2031				
	United States				
John Fergu	eson	0	\$0.00	\$0.00	\$0.00
Title: Addr 1: Addr 2: CSZ:	Board Member 1 Symphony Place Nashville, TN 37201-2031				
	United States				
Robert Fisher		0	\$0.00	\$0.00	\$0.00
Title: Addr 1: Addr 2:	Board member 2701 Belmont Blvd				
CSZ: Country:	Nashville, TN 37212 United States				
Pedro Garci	ia	0	\$0.00	\$0.00	\$0.00
Title: Addr 1: Addr 2:	Board Member 1 Symphony Place				
CSZ: Country:	Nashville, TN 37201-2031 United States				
John Gawal	luck	0	\$0.00	\$0.00	\$0.00
Title: Addr 1: Addr 2:	Board Member 1 Symphony Place				
CSZ: Country:	Nashville, TN 37201-2031 United States				
lames Good	ch	0	\$0.00	\$0.00	\$0.00
Title: Addr 1: Addr 2:	Board Member 1 Symphony Place				
CSZ:	Nashville, TN 37201-2031 United States				
dward Goo	drich	0	\$0.00	\$0.00	\$0.00
	Board Member 1 Symphony Place				

Name and	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
Carl Grims	tad	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
Rose Grino	dstaff	0	\$0.00	\$0.00	\$0.00
Tal.	David .				Ψ0.00
Title:	Board member				
Addr 1: Addr 2:	6210 Belle Rive Drive				
CSZ:	Brentwood, TN 37027				
Country:	United States				
Francis Gu	ess	0	\$0.00	\$0.00	\$0.00
				40.00	Ψ0.00
Title:	Board member				
Addr 1:	3723 Hydes Ferry Road				
Addr 2:	NILUCH- TAL 07040				
CSZ:	Nashville, TN 37218 United States				
Country.	Onlied States				
Erin Hall		0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
Charlene Ha	arb	0	\$0.00	\$0.00	\$0.00
Title	December 1			*	Ψ0.00
Title: Addr 1:	Board Member 1 Symphony Place				
Addr 1:	г Сутрпону гасе				
CSZ:	Nashville, TN 37201-2031				
	United States				
John Hardca	astle Jr	0	\$0.00	\$0.00	\$0.00
Title	Poard mambar				,
Title: Addr 1:	Board member 1600 Division Street				
Addr 1:	1999 DIVISION SHEET				
CSZ:	Nashville, TN 37219	•			
	United States				
Jeannie Has	tings	0	\$0.00	\$0.00	\$0.00
Title:		_		45.00	ψυ.υυ
TIUG.	Board member				

Name and A	Address	Ave. Hrs/week	Comp.	Benefits	Expenses
	127 Third Ave South	V-			
Addr 2: CSZ:	Nachvilla TN 27204				
	Nashville, TN 37201 United States				
William Hawk		0	\$0.00	\$0.00	\$0.00
Title:	Board member				
	424 Church Street				
Addr 2:	, z v ondron outdet				
CSZ:	Nashville, TN 37219				
Country:	United States				
Edwina Hefne	er	0	ድብ በብ	#0.00	60.00
	<u>.</u>	U	\$0.00	\$0.00	\$0.00
	Board member				
	708 Postal Court				
Addr 2:	Deschard TN 07007				
	Brentwood, TN 37027 United States				
Country.	Officed States				
Mona Hicks		0	\$0.00	\$0.00	\$0.00
Title: E	Board Member				
	Symphony Place				
Addr 2:	, , ,				
CSZ: N	Nashville, TN 37201-2031				
Country: L	Jnited States				
Dan Hogan		0	\$0.00	\$0.00	\$0.00
				7-1-5	Ψα.55
	Board member				
Addr 1: 4 Addr 2:	24 Church Street				
	Nashville, TN 37219				
Country: L					
Martha Ingram	1	0	\$0.00	\$0.00	\$0.00
Title: B	Board Chairman				
	400 Harding Road				
Addr 2:					
	lashville, TN 37205				
Country: U	Inited States				
Gordon Inman		0	\$0.00	\$0.00	\$0.00
		J	ψ0.00	φυ.υυ	φυ.υυ
	oard member				
	30 Public Square				
Addr 2:	ronklin TNI 27004				
	ranklin, TN 37064				
Country: U	Inited States				
Clay Jackson		0	\$0.00	\$0.00	\$0.00
,		ŭ	43.00	υυ.υφ	φυ.υυ

Name and	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Title: Addr 1: Addr 2:	Board Member 1 Symphony Place				
CSZ: Country:	Nashville, TN 37201-2031 United States				
Ruth Johns	son	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
Russell Jon	es Jr	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1: Addr 2:	49 Music Square West				
CSZ:	Nashville, TN 37203				
	United States				
Suzanne K	essler	0	\$0.00	\$0.00	\$0.00
			*****	Ψ0.00	Ψ0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2: CSZ:	Nashville, TN 37201-2031				
	United States				
William King	Jr	0	\$0.00	#0.00	22.00
·		Ů	φυ.υυ	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2: CSZ:	Neshalls Thi 07004 0004				
	Nashville, TN 37201-2031 United States				
Country.	Officed States				
Deborah Ko	ch	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	1930 19th Avenue North				
Addr 2:					
CSZ:	Nashville, TN 37212				
Country:	United States		•		
Michelle Lac	key	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
	121 Players Court				
Addr 2:	1211 layers Court				
	Nashville, TN 37211				
	United States				
Larry Larkin		0	\$0.00	#A 00	0.5.5-
,		U	\$0.00	\$0.00	\$0.00

Name a	nd Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Title:	Board member	-			
Addr 1	= =				
Addr 2					
CSZ:	Nashville, TN 37215				
	y: United States				
Kevin La	vender	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1	3 • 3 ·				
Addr 2					
CSZ:	Nashville, TN 37201-2031				
Countr	y: United States				
Sally Lev	ine	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:					
Addr 2:					
CSZ:	Nashville, TN 37205				
Country	y: United States				
Ellen Mari	in	•	22.00		
	341	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:					
Addr 2:					
CSZ:	Nashville, TN 37205				
Country	r: United States				
Robert Mo	Neilly III	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	· Cymphony · lacc				
CSZ:	Nashville, TN 37201-2031				
Country					
Barbara M	lelkus	0	\$0.00	\$0.00	PO 00
		Ü	Ψ0.00	φυ.υυ	\$0.00
Title:	Board member				
Addr 1:	26 Castlewood Court				
Addr 2:					
CSZ:	Nashville, TN 37215				
Country	: United States				
Elizabeth N	<i>f</i> lolteni	0	\$0.00	\$0.00	\$0.00
				4-1-2	φυ.υυ
Title:	Board member				
Addr 1:	40 Burton Hills				
Addr 2:					
CSZ:	Nashville, TN 37215				
Country:	United States				
John Morri	S	0	\$0.00	ደስ በስ	\$ 0.00
33 morris	- -	U	Ψυ.υυ	\$0.00	\$0.00

Name ar	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Title:	Board member				
Addr 1:	414 Union Street				
Addr 2:					
CSZ:	Nashville, TN 37219				
Country	: United States				
William M	oseley	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	211 Ensworth Avenue				
Addr 2:					
CSZ:	Nashville, TN 37205				
Country	: United States				
Keith Nich	olas	0	ድለ ዕዕ	TO 00	
		Ü	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	3 1 3				
CSZ:	Nashville, TN 37201-2031				
Country	United States				
Hal Pennir	gton	0	\$0.00	\$0.00	¢0.00
		J	Ψ0.00	φυ.υυ	\$0.00
Title:	Board member				
Addr 1:	1415 Murfreesboro Road				
Addr 2:					
CSZ:	Nashville, TN 37217				
Country:	United States				
David Perd	ue	0	\$0.00	\$0.00	\$0.00
			7-10-0	45.00	Ψ0.00
Title:	Board member				
Addr 1:	100 Mission Ridge				
Addr 2:					
CSZ:	Goodlettsville, TN 37072				
Country:	United States				
Pamela Pfe	effer	0	\$0.00	\$0.00	\$0.00
Title:	Board Secretary				
Addr 1:	836 Treemont Court				
Addr 2:	add Treemont Court				
CSZ:	Nechville TN 27920				
	Nashville, TN 37220				
Country:	United States				
Joseph Pre	siey	0	\$0.00	\$0.00	\$0.00
Title	Depart Visco Charles				, , , , ,
Title:	Board Vice-Chairman				
Addr 1:	104 Woodmont Blvd				
Addr 2:					
CSZ:	Nashville, TN 37205				
Country:	United States				
Charles Pru	ett	0	ቁ ብ ብላ	60 00	00.00
		U	\$0.00	\$0.00	\$0.00

Name :	and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Title:	Board Member				
Addr	, , ,				
Addr					
CSZ:	Nashville, TN 37201-2031				
Coun	try: United States				
John Ro	ochford	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr	1: 2200 Abbott Martin Road				
Addr	2;				
CSZ:	Nashville, TN 37215				
Count	ry: United States				
Norma F	Rogers	0	\$0.00	\$0.00	\$0.00
Title	Donal March				
Title:	Board Member				
Addrí Addrí	, ,				
CSZ:	2. Nashville, TN 37201-2031				
	ry: United States				
Count	ry. Office States				
Anne Rı	ussell	0	\$0.00	\$0.00	\$0.00
Title:	Board Vice-Chairman				
Addr 1					
Addr 2			is the second of		
CSZ:	Nashville, TN 37219				
	ry: United States				
James S	Schnuck	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1	: One Burton Hills Blvd				
Addr 2	:				
CSZ:	Nashville, TN 37215				
Countr	y: United States				
Kristi Se	ehafer	0	\$0.00	\$0.00	\$0.00
			Ψ5.00	ψυ.υυ	φυ.υυ
Title:	Board member				
Addr 1					
Addr 2					
CSZ:	Nashville, TN 37206				
Countr	y: United States				
Mary Rut	h Sheil	0	\$0.00	\$0.00	\$0.00
		, , , , , , , , , , , , , , , , , , ,	70.00	φυ.υυ	ψυ.υυ
Title:	Board member				
Addr 1	Ç .				
Addr 2:					
CSZ:	Nashville, TN 37215				
Country	y: United States				
Rhonda S	Small	0	\$0.00	\$0.00	\$0.00
		J	Ψυ.υυ	φυ.υυ	φυ.υυ

		Ave. Hrs/week	Comp.	Benefits	Expense
Title:	Board member				
Addr 1:					
Addr 2:					
CSZ:	Nashville, TN 37205				
Country	/: United States				
Patti Rode	es Hart Smallwood	0	\$0.00	\$0.00	\$0.0
Title:	Board member				
Addr 1:	4421 Tyne Blvd				
Addr 2:					
CSZ:	Nashville, TN 37215				
Country					
John Steir	1	0	\$0.00	#0 00	
		U	φυ.υυ	\$0.00	\$0.0
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country	: United States				
Christophe	er Stenstrom	0	\$0.00	\$0.00	\$0.00
				Ψ0.00	Ψ0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
E W Steph	enson Jr	0	\$0.00	\$0.00	\$0.00
Title	Donat was at			,	Ψ0.00
Title:	Board member				
Addr 1:	315 Deaderick Street				
Addr 2:					
CSZ:	Nashville, TN 37237				
Country:	United States				
Howard St	ringer	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	3700 Whitland Avenue				
Addr 2:	37 00 Windana Avenue				
CSZ:	Noshvillo TN 27205				
	Nashville, TN 37205				
Country:	United States				
Bruce Sulliv	van	0	\$0.00	\$0.00	\$0.00
T:41	Parad Manuta			+	Ψ0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				•
ouis Todd	Jr	0	\$0.00	\$0.00	\$0.00

Name an	d Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Title:	Board Vice-Chairman				
Addr 1:	22 Whtiworth Blvd				
Addr 2:	Nechalle TN 07005				
CSZ:	Nashville, TN 37205 United States				
Country.	Office States				
Jay Turner	-	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:					
CSZ:	Nashville, TN 37201-2031				
Country:	United States				
Steve Turn	er	0	\$0.00	\$0.00	\$0.00
		_	Ψ3.55	Ψ0.00	φ0.00
Title:	Board member				
Addr 1: Addr 2:	138 Second Ave North				
CSZ:	Nashville, TN 37201				
	United States				
Alan Valen	tine	0	\$0.00	\$0.00	\$0.00
Title:	Board Member				
Addr 1:	1 Symphony Place				
Addr 2:	, , , , , , , , , , , , , , , , , , , ,				
CSZ:	Nashville, TN 37201-2031				
Country:					
David T Va	nderwater	0	\$0.00	\$0.00	\$0.00
				7-1	φυ.υυ
Title:	Board member				
Addr 1:	425 Jackson Blvd				
Addr 2:					
CSZ:	Nashville, TN 37205				
Country:	United States				
Jeremy Willia	ams	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	1145 Shelton Avenue				
Addr 1: Addr 2:	1145 Sileitori Averlue				
CSZ:	Nashville, TN 37216				
Country:	United States				
David Willian	ns II	0	\$0.00	\$0.00	\$0.00
Title:	Board Treasurer				
Addr 1:	305 Kirkland Hall				
Addr 2:					
CSZ:	Nashville, TN 37240				
Country:	United States				
D. / 1450					
Betsy Wills		0	\$0.00	\$0.00	\$0.00

Name and Address		Ave. Hrs/week	Comp.	Benefits	Expenses
Title:	Board member	***	-		
Addr 1:	1201 Belle Meade Blvd				
Addr 2:					
CSZ:	Nashville, TN 37205				
Country:	United States				
Derek Young		0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	PO Box 787				
Addr 2:					
CSZ:	Lebanon, TN 37088				
Country:	United States				
Shirley Zeitl	in	0	\$0.00	\$0.00	\$0.00
Title:	Board member				
Addr 1:	4301 Hillsboro Road				
Addr 2:					
CSZ:	Nashville, TN 37215				
Country:	United States				
TOTALS			* 0.00	A. a.c.	
·OIALU			\$0.00	\$0.00	\$0.00

Statement 13 Form: 990 Page: 8 Part: VIII Question:

NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Relationship of Activities

Line No	Relationship of Activities to the Accomplishment of Exempt Purposes
93 a	Serving the musical needs of the community by presenting live concert performances.
93 b	Serving the musical needs of the community by presenting live concert performances.
95	This amount reflects interest earned from the various operating accounts of the Nashville Symphony.
101	This amount represents the net amount from various fundraising events for the current fiscal year.
102	Promoting music throught the sale of recordings, books and various signature items.
99	This amount is the earnings received from the Community Foundation of Middle Tennessee for non-controlled endowments designated on behalf of the Nashville Symphony.
97 b	This is the internal rental charge for performances held by the Nashville Symphony according to our mission statement.
93 с	Expediting the handling of concert ticket requests received from patrons.

Form: Schedule A

Page: 3 Part: IV-A Question: 22 NASHVILLE SYMPHONY ASSOCIATION 62-0550979

Other Income

Description	2005	2004	2003	2002
Miscellaneous	\$13,489.00	\$1,715.00	\$44,407.00	\$42,866.00
Total:	\$13,489.00	\$1,715.00	\$44,407.00	\$42,866.00