Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection SEP 1, 2023 2024 A For the 2023 calendar year, or tax year beginning and ending AUG 31. Check if applicable: C Name of organization D Employer identification number Address change BALTIMORE SYMPHONY ORCHESTRA, INC. Name change 52-0629696 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 1212 CATHEDRAL STREET 410-783-8100 G Gross receipts \$ 43,137,059. City or town, state or province, country, and ZIP or foreign postal code Amended BALTIMORE, MD 21201-5517 H(a) Is this a group return Applica-F Name and address of principal officer: MARK C. HANSON for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes No I Tax-exempt status: X 501(c)(3) If "No," attach a list. See instructions __ 501(c) ((insert no.) 4947(a)(1) or WWW.BSOMUSIC.ORG H(c) Group exemption number J Website: K Form of organization: X Corporation Year of formation: 1942 M State of legal domicile: MD Association Part I Summary Briefly describe the organization's mission or most significant activities: PROVIDING SYMPHONIC CONCERTS Governance CULTURAL AND EDUCATIONAL. if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Check this box 33 Number of voting members of the governing body (Part VI, line 1a) 3 32 Number of independent voting members of the governing body (Part VI, line 1b) 4 687 5 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) 180 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 23,931,958. 34,134,062. 8 Contributions and grants (Part VIII, line 1h) 5,899,631. 7,369,708. Program service revenue (Part VIII, line 2g) 4,516. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 15,777. 309,146. 168,355. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c (10c, and 11e) 30,156,512. 676,641. Total revenue - add lines 8 through 11 (must equal Part VIII column (A), line 12) Grants and similar amounts paid (Part IX, column (A) lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. 21,980,162. 22,467,583. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 403,344. 381,497. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 11,833,200. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,333,323. 18 Total expenses. Add lines 13 7 (must equal Part IX, column (A), line 25) 33,716,829. 34,682,280. 19 Revenue less expenses. Subtract line 18 from line 12 6,994,361. -3,560,317. Beginning of Current Year **End of Year** 9,275,131 20 Total assets (Part X, line 16) 22,195,398. Total liabilities (Part X, line 26) 21,457,131. 24,845,340. -12,182,000. -2,649,942 Net assets or fund balances. Subtract line 21 from line 20 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 mmu Signature of officer Sign ANN BROMERY, Here Type or print name and title Date Check Print/Type preparer's name Preparer's signature Paid LORI S. BURGHAUSER LORI S. BURGHAUSER 07/14/25 ₱00370694 self-employed SC&H GROUP, INC Firm's EIN 20-5991824 Preparer Firm's name Firm's address 910 RIDGEBROOK ROAD Use Only SPARKS, MD 21152 Phone no. (410) 403-1500 Yes May the IRS discuss this return with the preparer shown above? See instructions

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Application Is For Return Application Is For Return Code	Electr	onic filing (e-file). You can electronically file Form 8868 to	request up	to a 6-month extension of time to fil	e any of t	he forms				
B888, wish www.ins.gov/e life-providens/e-life-for-chamtles-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debt) with this Form B888, see Form B453-TE and Form B879-TE for payment instructions. All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 700-bt to request an extension of time to file income tax returns. Part I - Identification		•								
Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8686, see Form 8453-TE and Form 8679-TE for payment instructions. All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7094 to request an extension of time to file income tax returns. Part I - Identification	reque	st for Form 8870 must be sent to the IRS in a paper format (see instrud	ctions). For more details on the electr	onic filing	of Form				
All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Type or Type	8868,	visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-p	orofits.							
All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file noome tax returns. Part I - Identification Type or Name of exempt organization, employer, or other filer, see instructions. BALTTMORE SYMPHONY ORCHESTRA, TNC. Fleely, the Name of exempt organization and the no. If a P.O. box, see instructions. SALTTMORE SYMPHONY ORCHESTRA, TNC. 1212 CATHEDRAL STREET City, town or post office, state, and ZIP code. For a foreign address, see instructions. BALTTMORE, MD 21201-5517 Enter the Return Code for the return that this application is for (file a separate application for each return). Quality (including 1) 03 Form 990 or Form 990 EZ Ofform 4720 (individual) 03 Form 990 Form 4720 (individual) 09 Form 4720 (individual) 09 Form 4720 (individual) 09 Form 4720 (individual) 09 Form 990 Form 4720 (individual) 09 Form 990 Form 990 Form 4720 (individual) 09 Form 990 Form 99	Cautio	on: If you are going to make an electronic funds withdrawal (direct deb	it) with this Form 8868, see Form 845	3-TE and	Form 8879-TE	for payment			
### Part I - Identification Name of exempt organization, employer, or other filer, see instructions.	instru	ctions.								
Type or Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Print BALTIMORE SYMPHONY ORCHESTRA, INC. \$2-0629696 BALTIMORE SYMPHONY ORCHESTRA, INC. \$2-0629696 City, town or post office, state, and ZIP code. For a foreign address, see instructions. \$212 CATHEDRAL STREET City, town or post office, state, and ZIP code. For a foreign address, see instructions. \$317 INORE, MD 21201-5517 Enter the Raturn Code for the return that this application is for (file a separate application for each return) Qplication is For Return Code for the return that this application is for (file a separate application for each return) Qprint Application is For Return Code for the return that this application is for (file a separate application for each return) Qprint Application is For Return Code for the return that this application is for (file a separate application is for Return Application is for Return Code (code Form 990-FE) Qprint Application is for Return Code (code Form 990-FE) Qprint Application is for Return Code (code Form 990-FE) Qprint Application is for Return Code, complete either Part II or Part III. Eart III. including signature, is applicable only for an extension of time to file Form 5330. Qprint III. Automatic Extension of Time to File for Exempt Organizations (see instructions) The books are in the care of ANN BROMENY Telephone No. 410-783-8090 If this is for a forup Rejurn prints the Forganization for sour cline to the organization of time on the corporalization is for an extension is for time until ULY 15	All co	porations required to file an income tax return other than Fo	rm 990-T	(including 1120-C filers), partnerships	, REMIC	s, and trusts				
Taxpayer identification number (TIN)	must i	use Form 7004 to request an extension of time to file income	e tax returi	ns.						
BALTIMORE SYMPHONY ORCHESTRA, INC. \$2-0629696	Part I	- Identification								
BALTIMORE SYMPHONY ORCHESTRA, INC. 32-0629696 Number, street, and room or suite no. If a P.O. box, see instructions. 1212 CATHEDRAL STREET City, town or post office, state, and ZIP code. For a foreign address, see instructions. BALTIMORE, MD 21201-5517 Enter the Return Code for the return that this application is for (file a separate application for each return). October Code Form 990 or Form 990 er Form 990 er Code Form 990 or Form 990 er Code Form 990 or Form 990 er Code Form 990 er Code Form 4720 (individual) O3 Form 5227 O4 Form 990 er Code Form	Type	or Name of exempt organization, employer, or other filer,	, see instru	uctions.	Taxpayer	identification n	iumber (TIN)			
Mumber, street, and room or suite no. If a P.O. box, see instructions.	Print									
Sumber, street, and room or suite no. If a P.O. box, see instructions.	BALTIMORE SYMPHONY ORCHESTRA, INC. 52-0629696									
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Enter the Return Code for the return that this application is for (file a separate application for each return) Application Is For Return Code Form 990 or Form 990-EZ			reign addr	ress, see instructions.) >					
Application Is For Code Code Form 990 or Form 990-EZ		BALTIMORE, MD 21201-5517								
Code	Enter	the Return Code for the return that this application is for (file	a separat	e application for each return)			01			
Form 990 or Form 990-EZ Form 4720 (individual)	Applic	cation Is For	Return	Application Is For			Return			
Form 4720 (individual) Form 990-PF 04 Form 6069 111 Form 990-PF 06 Form 6870 112 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6870 112 Form 990-T (trust other than above) 06 Form 630 (individual) 13 Form 990-T (corporation) 07 Form 5330 (other than individual) 14 Torm 1041-A • After you enter your Return Code, complete either Part II or Part III, Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Name Plan Year Ending (IMM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of ANN BROMENY 1212 CATREDRAL STREET - BAL/TIMORE, MD 21201-5517 Telephone No. 410-783-80.90 • If the organization does not have an office or place of business in the United States, check this box			Code	. (7)			Code			
Form 990-PF	Form	990 or Form 990-EZ	01	Form 4720 (other than individual)			09			
Form 990-T (rust other than above) 06	Form	4720 (individual)	03	Form 5227			10			
Form 990-T (trust other than above) Form 990-T (corporation)	Form	990-PF	04	Form 6069			11			
Form 1041-A	Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12			
• After you enter your Return Code, complete either Part III or Part III. P	Form	990-T (trust other than above)	06	Form 5330 (individual)			13			
After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of ANN BROMERY 1212 CATHEDRAL STREET − BALTIMORE, MD 21201−5517 Telephone No. 410−783−8030 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) I frequest an automatic emonth extension of time until JULY 15, 20 25, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 or SEP 1, 20 23, and ending	Form	990-T (corporation)	07	Form 5330 (other than individual)			14			
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doing in the (income that a dy mont by storm). Soo method details		using EFTPS (Electronic Federal Tax Payment System). See			Зс	\$	0.			

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE BALTIMORE SYMPHONY ORCHESTRA'S (BSO) MISSION IS TO PROMOTE,
	ORGANIZE, MANAGE AND MAINTAIN A SYMPHONY ORCHESTRA FOR THE CITY OF
	BALTIMORE AND THE STATE OF MARYLAND AND TO HOLD, SPONSOR, AND PRESENT
	MUSICAL CONCERTS BY THE BALTIMORE SYMPHONY ORCHESTRA.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 28,656,613. including grants of \$) (Revenue \$ 7,369,708.)
	PROVIDES SYMPHONIC CONCERTS, CULTURAL AND EDUCATION PRESENTATIONS,
	CULTURAL AND EDUCATIONAL RENTALS, BROADCASTING AND RECORDING.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$
_	
4c	(Code:) (Expenses \$
	
	
4d	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 28,656,613.
	Form 990 (2023)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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? If "Yes," complete Schedule C, Part II	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_ <u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			1
0				x
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		77	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the consideration assistate as a 60 consideration of the United Otates 0	14a		X
b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	, , , a		
J	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	טדו		
13		15		X
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		_ v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		37	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			l _
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

BALTIMORE SYMPHONY ORCHESTRA, INC. 52-0629696 Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Х 23 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? If "Yes," answer lines 24b through 24d and complete 24a Schedule K. If "No," go to line 25a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a Х transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 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? If "Yes. Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L_Part II Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L, Part IV 28a b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c Х Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes " complete Schedule M 30

31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			

332004 12-21-23

Form 990 (2023)

Yes No

257

0

(gambling) winnings to prize winners?

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable

Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Form 990 (2023) BALTIMORE SYMPHONY ORCHESTRA, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	687			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	•	2b	Х	
За				3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	nt)?	4a		Х
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	its (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).)			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			,,
	to file Form 8282?	 I _ :	 T	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	•	_		37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		xt?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are interested funds. Bit is despected in additional funds are interested funds.			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	а бу п	ie	8		
9	Sponsoring organizations maintaining donor advised funds.			0		
а	Did the arrange in a constitution realization and the state has distributed as well a scatting 10000			9a		
b	Did the control in a series in a selection of the first term of the series of the seri			9b		
10	Section 501(c)(7) organizations. Enter:			0.0		
а	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:		•			
а	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	?	12a		
	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.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	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	1	ı			
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					٦,
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t inco	me?	16		X
4-	If "Yes," complete Form 4720, Schedule O.	40.00				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac			4-		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

332005 12-21-23

BALTIMORE SYMPHONY ORCHESTRA, INC. 52-0629696 Form 990 (2023) 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 on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 33 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 32 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X 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? 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a Х **b** Each committee with authority to act on behalf of the governing body? 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х on Schedule O how this was done 12c Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization Х 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MD, VA, PA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request __ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

Form **990** (2023)

MD

21201-5517

State the name, address, and telephone number of the person who possesses the organization's books and records

ANN BROMERY - 410-783-8090

1212 CATHEDRAL STREET, BALTIMORE.

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

Check this box if fletther the organization his	1	Jiya	IIIZa			ірсі	Jac			(E)
(A)	(B)			((Pos				(D)	(E)	(F)
Name and title	Average		not c	heck i	more	than o		Reportable	Reportable compensation	Estimated
	hours per week			ss per ıd a di				compensation from	from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	direc				p		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	al tru		oyee	om pe		1099-NEC)	,	and related
	below	Individual trustee or director	Institutional trustee	er	Jdwe	est co loyee	ıer	. (7)		organizations
	line)	Indiv	Instii	Officer	Key employee	Highest compensated employee	Former	10		
(1) MR. MARK HANSON	32.00									_
PRESIDENT AND CEO	8.00	Х		Х				342,120.	85,530.	69,486.
(2) MR. EDWARD CARNEY	40.00									
CONCERT MASTER	0.00					X		276,324.	0.	44,766.
(3) MS. AGNIESZKA RAKHMATULLAEV	40.00									
SR. VP & COO	0.00				X			203,747.	0.	44,736.
(4) MS. ALLISON BURR-LIVINGSTONE	30.00									
SR. VP AND CHIEF ADV. OFFICER	10.00				Х			141,436.	47,146.	45,236.
(5) MS. KATHERINE NEEDLEMAN	40.00	1								
MUSICIAN	0.00					Х		168,516.	0.	44,666.
(6) MR. BRIAN PRECHTL	40.00									
DIRECTOR OF EDU & COMM ENGAGEMENT	0.00					X		164,985.	0.	40,115.
(7) MR. JOHN G. MCLEAN, JR.	36.00									
SR. VP & CFO (PART YEAR)	4.00			Х				141,416.	35,354.	22,609.
(8) MS. CYRINA R. YARBROUGH	40.00									
SR. VP & CHIEF MKTG. & COMM. OFFICER	0.00				Х			176,813.	0.	13,172.
(9) MR. TODD PRICE	40.00									
HEAD STAGEHAND	0.00					Х		165,655.	0.	23,628.
(10) MR. MARIO SERRUTO	40.00									
ASSISTANT HEAD STAGEHAND	0.00					X		161,580.	0.	23,544.
(11) MR. BRIAN SMITH	30.00									
SR. VP & CHR	10.00			Х				127,964.	0.	12,610.
(12) MR. BARRY F. ROSEN	2.00									
CHAIR	1.00	Х		Х				0.	0.	0.
(13) HON. STEVEN R. SCHUH	2.00									
VICE CHAIR	1.00	Х		Х				0.	0.	0.
(14) MR. CHRISTIAN JOHANSSON	2.00									_
VICE CHAIR	0.00	Х		Х				0.	0.	0.
(15) MR. MICHAEL FORSTER	2.00									
TREASURER	0.00	Х		Х				0.	0.	0.
(16) MS. MAGGIE DE CUEVAS	2.00									
SECRETARY	0.00	Х	L	Х				0.	0.	0.
(17) MS. LISA BROWN ALEXANDER	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
332007 12-21-23										Form 990 (2023)

332007 12-21-23

52-0629696

101111 990 (2023)	THE DIMINE	/T 4 T		110		0 1	1177	, 1110.	52 0025	O Tage •
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per	(do not check more than one				Reportable	Reportable	Estimated amount of		
	week		, unles cer an					compensation from	compensation from related	other
	(list any	tor						the	organizations	compensation
	hours for	direc				P		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	al tru		yee	ad uu		1099-NEC)	,	and related
	below	idual	ution	ie i	sey employee	est co	ъ			organizations
	line)	Indiv	Institutional trustee	Officer	Key e	Highest compensated employee	Former			
(18) MR. CHUCK ALSTON	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(19) MS. MARY ELLEN BARBERA	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(20) MR. RICK BERNSTEIN	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(21) MS. KATHLEEN A. CHAGNON, ESQ.	2.00									
BOARD MEMBER	0.00	Х						0,	0.	0.
(22) MR. HARVEY COHEN	2.00)	
BOARD MEMBER	0.00	Х						0.	0.	0.
(23) MR. ROBERT B. COUTTS	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(24) MR. WALTER DOGGETT III	2.00							.01		
BOARD MEMBER	0.00	Х						0.	0.	0.
(25) MR. MICHAEL ERNST	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(26) MS. ELLEN R. FISH	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
1b Subtotal)		2,070,556.	168,030.	384,568.
c Total from continuation sheets to Par	t VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)]) <u>.</u>			2,070,556.	168,030.	384,568.
2 Total number of individuals (including by					000	\ wh	0 r0	ceived more than \$100	000 of reportable	

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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

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

5 X

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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
OPUS 3 ARTISTS, LLC, 348 W 57TH ST. SUITE	CONDUCTORS / GUEST	
282, NEW YORK, NY 10019	ARTISTS	484,177.
JONATHON HEYWARD, C/O IMG ARTISTS		
MANAGEMENT, 7 W 54TH ST, NEW YORK, NY	MUSIC DIRECTOR	414,055.
CAPACITY INTERACTIVE CONSULTING, LLC		
82 NASSAU STREET #60283, NEW YORK, MD 10038	MARKETING	407,000.
COMMUNITY COUNSELING SERVICE COMPANY LLC	FUNDRAISING	
PO BOX 824885, PHILADELPHIA, PA 19182	COUNSELING	368,306.
ZIGER/SNEAD LLP		
1006 MORTON ST, BALTIMORE, MD 21201	CONSTRUCTION DESIGN	171,724.
2 Total number of independent contractors (including but not limited to those listed		
\$100,000 of compensation from the organization 9		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2023)

15

Form 990 BALTIMOR	E SYMPHO)NY	. O	RC	HE	ST	RA	, INC.	52-062	9696
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	=				loyee		the	organizations	compensation
	(list any	or directo				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	Individual trustee	Institutional trustee		yee	Highest compensated employee				organizations
	below	dualt	ution	<u>ا</u>	Key employee	est co	er			organizationio
	line)	Indivi	Instit	Officer	Key e	Highe	Former			
(27) MS. DENISE GALAMBOS	2.00									
BOARD MEMBER (PART YEAR)	0.00	Х						0.	0.	0.
(28) MS. SANDRA LEVI GERSTUNG	2.00							-	-	-
BOARD MEMBER	0.00	Х						0.	1 0.	0.
(29) MR. DOUGLAS HAMILTON III	2.00									•
BOARD MEMBER	0.00	х						0.	0.	0.
(30) MS. DENISE HARGROVE	2.00									
BOARD MEMBER	0.00	х						0	0.	0.
(31) MR. JOSEPH JENNINGS, JR.	2.00								•	•
BOARD MEMBER	0.00	х						0.	0.	0.
(32) MR. MICHAEL KEANE	2.00								•	•
BOARD MEMBER	0.00	Х						0.	0.	0.
(33) MS. NANCY KOOP	2.00							40	•	•
BOARD MEMBER	0.00	х						0.	0.	0.
(34) MR. MARC E. LACKRITZ	2.00							0.	•	•
BOARD MEMBER	0.00	Х						0.	0.	0.
(35) MR. IKE LEGGETT	2.00							•	•	•
BOARD MEMBER	0.00	Х				7		0.	0.	0.
(36) MS. MARIE LERCH	2.00	25						•	•	•
BOARD MEMBER	0.00	X						0.	0.	0.
(37) DR. MARSHALL A. LEVINE	2.00	4						0.	0.	.
BOARD MEMBER	0.00	X	7					0.	0.	0.
(38) MR. JASON PERRY	2.00	27						· ·	0.	.
BOARD MEMBER	0.00	v						0.	0.	0.
(39) MS. JUDY PHARES	2.00	- 22							0.	0.
BOARD MEMBER	0.00	v						0.	0.	0.
(40) MR. STEPHEN D. SHAWE ESQ.	2.00	22							0.	0.
BOARD MEMBER	0.00	Х						0.	0.	0.
(41) HON. JAMES T. SMITH, JR.	2.00	- 22							0.	0.
BOARD MEMBER	0.00	Х						0.	0.	0.
(42) MR. SOLOMON H. SNYDER M.D.	2.00	Λ						0.	0.	0.
BOARD MEMBER	0.00	Х						0.	0.	0
(43) MR. BARRY WILLIAMS	2.00	Λ						0.	0.	0.
BOARD MEMBER	0.00	Х						0.	0.	n
(44) MR. PETER L. WINIK	2.00	Δ						0.	0.	0.
BOARD MEMBER	0.00	Х						0.	0.	n
		Λ						0.	0.	0.
(45) MR. LEONARD WILLIAMS INTERIM CFO	36.00	1		х				0.	0.	0
INTERIM CFO	4.00			Λ		\vdash		0.	0.	0.
		1								
	<u> </u>	1	L	ı	l	ı				
Total to Part VII, Section A, line 1c										
Total to Fait VII, Occilott A, III C TC								I		

Form 990 (2023) BALTIMO
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
		•	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenuè excluded from tax under
					Turiction revenue	business revenue	sections 512 - 514
ည ည	1 a	Federated campaigns 1a					
an		Membership dues 1b					
يَ ق		Fundraising events 1c	711,200.				
ifts		Related organizations 1d	8,560,000.				
nila		Government grants (contributions)	4,640,722.				
Sir		All other contributions, gifts, grants, and	, ,				
uti	•	similar amounts not included above 1f	20,222,140.				
Q ţ	,	Noncash contributions included in lines 1a-1f 1g \$	49,025.				
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f	,	34,134,062.			
			Business Code	, ,			
Φ	2 8	CONCERT INCOME	711130	6,322,771.	6,322,771.	- 31	
Program Service Revenue	- k	EDUCATION REVENUE	711130	633,040.	633,040		
Ser		BSYO TUITION REVENUE	711130	413,897.	413,897.		
am See							
Be	•						
Pro		All other program service revenue					
		Total. Add lines 2a-2f		7,369,708.			
	3	Investment income (including dividends, interes			24		
		other similar amounts)		4,516.			4,516.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties		285.			285.
		(i) Real	(ii) Personal	60			
	6 a	Gross rents 6a 603,206.					
	k	Less: rental expenses 6b 547,619.					
		Rental income or (loss) 6c 55,587.					
		Net rental income or (loss)		55,587.			55,587.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	k	Less: cost or other basis					
ē		and sales expenses 7b					
en		Gain or (loss) 7c					
Re		Net gain or (loss)					
her Revenue		Gross income from fundraising events (not					
₹		including \$ 711,200. of					
		contributions reported on line 1c). See					
		Part IV, line 18	497,683.				
	k	Less: direct expenses 8b	912,799.				
	c	Net income or (loss) from fundraising events		-415,116.			-415,116.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	k	Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	k	Less: cost of goods sold 10b					
	C	Net income or (loss) from sales of inventory					
g			Business Code				
on e	11 a	EXPIRED GIFT CERTIFICATES	900099	335,696.			335,696.
ane	k	CONCESSIONS	722513	182,433.			182,433.
Miscellaneous Revenue	C	VENDOR REFUND	900099	144.			144.
Mis	C	All other revenue	900099	9,326.			9,326.
	•	Total. Add lines 11a-11d		527,599.			4=
	12	Total revenue. See instructions		41,676,641.	7,369,708.	0.	172,871.

332009 12-21-23

	Check if Schedule O contains a respon	se or note to any line in	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 211 610	1 126 070	70 026	05 504
	trustees, and key employees	1,311,618.	1,136,278.	79,836.	95,504
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and			())	
	persons described in section 4958(c)(3)(B)	15 044 752	12 625 055	1 000 000	1 150 106
7	Other salaries and wages	15,844,753.	13,625,955.	1,060,602.	1,158,196
8	Pension plan accruals and contributions (include	1 270 005	1 250 062	127 222	
_	section 401(k) and 403(b) employer contributions)	1,378,085. 2,663,018.	1,250,863. 2,414,334.	127,222. 35,645.	212 020
9	Other employee benefits	1,270,109.	1,102,333.	76,379.	213,039 91,397
0	Payroll taxes	1,2/0,109.	1,102,333.	10,319.	91,397
1	Fees for services (nonemployees):		110		
a	Management	49,390.		49,390.	
b	Legal	90,073.		90,073.	
C	Accounting	50,126	9	50,126.	
	Lobbying Professional fundraising services. See Part IV, line 17	381,497		30,120.	381,497
e	Investment management fees	301,437			301,437
f	Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A), amount, list line 11g expenses on Sch 0.)	3,668,158.	3,095,513.	541,224.	31,421
12	Advertising and promotion	1,871,409.	1,624,543.	311,221	246,866
3	Office expenses	383,523.	268,352.	111,371.	3,800
4	Information technology	340,489.	3,886.	336,603.	2,000
5	Royalties	V-010/1001	3,000	000,0001	
6	Occupancy	2,125,458.	2,125,458.		
7	Travel	511,825.	495,624.	15,689.	512
8	Payments of travel or entertainment expenses				
•	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest	527,876.		527,876.	
1	Payments to affiliates	•		,	
2	Depreciation, depletion, and amortization	111,386.	111,386.		
3	Insurance	257,964.	12,121.	245,843.	
4	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	EQUIPMENT RENTAL	399,972.	399,972.		
b	EQUIPMENT HAULING	320,466.	320,466.		
С	BAD DEBTS	200,000.		200,000.	
d	CREDIT CARD FEES	181,491.	181,491.		
е	All other expenses	743,594.	488,038.	135,107.	120,449
5	Total functional expenses. Add lines 1 through 24e	34,682,280.	28,656,613.	3,682,986.	2,342,681
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Par	tΧ	Balance Sheet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			750.	1	2,507
	2	Savings and temporary cash investments			4,075,095.	2	8,068,460
	3	Pledges and grants receivable, net			1,231,385.	3	9,842,213
	4	Accounts receivable, net		311,119.	4	402,292	
	5	Loans and other receivables from any current or	officer, director,				
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	ons		5		
	6	Loans and other receivables from other disqualif	sons (as defined				
		under section 4958(f)(1)), and persons described				6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			30,654.	8	30,654
⋖	9	Prepaid expenses and deferred charges			1,072,288.	9	881,028
	10a	Land, buildings, and equipment: cost or other		5 554 400			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	5,751,409.	455 600		0 516 451
					466,693.	10c	2,716,451
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets			2 007 147	14	051 702
	15	Other assets. See Part IV, line 11			2,087,147.	15	251,793
	16	Total assets. Add lines 1 through 15 (must equa			9,275,131.	16	22,195,398
	17	Accounts payable and accrued expenses			1,614,512.	17	2,133,086
	18	Grants payable			4,692,921.	18	6,524,207
	19	Deferred revenue			4,032,321.	19 20	0,324,207
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to any current or form		A		21	
ties	22	trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela			2,240,000.	23	2,620,000
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, par					
		parties, and other liabilities not included on lines					
		of Schedule D			12,909,698.	25	13,568,047
	26	T			21,457,131.		24,845,340
		Organizations that follow FASB ASC 958, che			,		,
ses		and complete lines 27, 28, 32, and 33.					
and	27	Net assets without donor restrictions			-16,076,000.	27	-14,526,000
Bal	28	Net assets with donor restrictions			3,894,000.	28	11,876,058
pu		Organizations that do not follow FASB ASC 9					
<u>.</u>		and complete lines 29 through 33.					
S Q	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or eq				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc				31	
Net	32	Total net assets or fund balances			-12,182,000.	32	-2,649,942
_	33				9,275,131.	33	22,195,398. Form 990 (2023

Form **990** (2023)

	rt XI Reconciliation of Net Assets		0025		Ι α	90
	Check if Schedule O contains a response or note to any line in this Part XI					X
	·					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	41	,67	6,6	41.
2	Total expenses (must equal Part IX, column (A), line 25)	2	34	,68	2,2	80.
3	Revenue less expenses. Subtract line 2 from line 1	3	6	,99	4,3	61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-12			
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	2	,53	7,6	97.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	-2	,64	9,9	42.
Pa	rt XII Financial Statements and Reporting	. 1				
	Check if Schedule O contains a response or note to any line in this Part XII					X
)		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O).			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	it			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Public

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization **Employer identification number** BALTIMORE SYMPHONY ORCHESTRA, 52-0629696 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 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.) 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions)) Total

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	22529011.	19446942.	21334384.	23931958.	3 4 13 4 062.	<u> 121376357</u>
2	Tax revenues levied for the organ-						
	ization'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	22529011.	19446942.	21334384.	23931958.	34134062.	121376357
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)						4052626.
	Public support. Subtract line 5 from line 4.				7		117323731
Sec	ction B. Total Support	1				T	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	22529011.	19446942.	21334384.	23931958.	34134062.	121376357
8	Gross income from interest,			5			
	dividends, payments received on		. (
	securities loans, rents, royalties,	185 510	2 5 4	100 076		600 005	0000105
	and income from similar sources	175,519.	3,541.	499,076.	752,964.	608,007.	2039107.
9	Net income from unrelated business						
	activities, whether or not the	•	5				
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	94 214	72 005	420 002	102 600	1025202	2106272
	assets (Explain in Part VI.)	84,214.	72,995.	430,092.	493,690.		2106273. 125521737
	Total support. Add lines 7 through 10	A A A America					,697,902.
	Gross receipts from related activities, First 5 years. If the Form 990 is for the			fourth or fifth tow.	voor oo o oostion F		,091,902.
13	organization, check this box and sto				year as a section 5		
Sec	ction C. Computation of Publ				•••••		
	Public support percentage for 2023 (column (f))		14	93.47 %
	Public support percentage from 2022					15	93.04 %
	33 1/3% support test - 2023. If the						
	stop here. The organization qualifies						7.7
b	33 1/3% support test - 2022. If the	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua						
17a	10% -facts-and-circumstances test	t - 2023. If the org	anization did not o				
	and if the organization meets the fact						
	meets the facts-and-circumstances to	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	t - 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	he facts-and-circum	nstances test, che	ck this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	·
						Schedule A	(Form 990) 2023

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

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

Sec	etion A. Public Support	clow, picase comp	nete i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf					07	
	The value of services or facilities furnished by a governmental unit to the organization without charge				C		
	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons				O		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			c))			
c	Add lines 7a and 7b						
8 Sec	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(a) 2019	(b) 2020	(6) 2021	(u) 2022	(e) 2023	(i) Total
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(C)					
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the	o organization's fi	ret eacond third	fourth or fifth toy	Vear as a scotion !	1 501(c)(3) organizatio	L
14	_	-			-		
Sec	check this box and stop hereetion C. Computation of Publi	c Support Per	centage	•••••	•••••		·····
	Public support percentage for 2023 (I			column (f))		15	<u></u> %
16			•			16	
	etion D. Computation of Inves					<u>, .~ , </u>	70
17				ine 13. column (f))		17	%
18	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar	-					
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization						

332023 12-21-23

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	12		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	0		
	8		
	9a		
	Ju		
	9b		
	9с		
	10a		
	10b		
_		- 000	2000

332024 12-21-23 Schedule A (Form 990) 2023

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Caat	the supported organization(s).	1		
Seci	tion D. All Type III Supporting Organizations			Г
			Yes	No
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	2		
Sect	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations			<u> </u>
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	.e)		
' a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction	ne)	
	Activities Test. Answer lines 2a and 2b below.	ii isti uctioi	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			110
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
	Did the organization exercise a substantial degree of direction over the policies programs and activities of each			

Schedule A (Form 990) 2023

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

Schedule A (Form 990) 2023

d Excess from 2022e Excess from 2023

52-062<u>9696 Page 8</u> BALTIMORE SYMPHONY ORCHESTRA, INC.

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

(See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
CONCESSIONS AND OTHER
2019 AMOUNT: \$ 57,259.
2021 AMOUNT: \$ 293,172.
2022 AMOUNT: \$ 277,405.
2023 AMOUNT: \$ 527,599.
FUNDRAISING
2020 AMOUNT: \$ 72,995.
2021 AMOUNT: \$ 136,920.
2022 AMOUNT: \$ 216,285.
2023 AMOUNT: \$ 497,683.
BSA GIFT SHOP
2019 AMOUNT: \$ 26,955.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

INC.

OMB No. 1545-0047

2023

Name of the organization

52-0629696

Employer identification number

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ

X 501(c)(3) (enter number) organization

BALTIMORE SYMPHONY ORCHESTRA

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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______\$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

BALTIMORE SYMPHONY ORCHESTRA, INC.

52-0629696

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>8,560,000</u>	Person X Payroll
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4	* 2,525,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,250,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Nume, dudi coo, gina En	\$1,364,793.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>1,187,604.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 875,000.	Person X Payroll

Schedule B (Form 990) (2023)

Name of organization Employer identification number

BALTIMORE	SYMPHONY	ORCHESTRA.	INC.

52-0629696

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 1,875,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	<u> </u>	\$ <u>1,060,000</u> .	Person X Payroll
(a)	(b)	(c) Total contributions	(d)
No. 10	Name, address, and ZIP + 4	\$ 1,100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

BALTIMORE SYMPHONY ORCHESTRA, INC.

52-0629696

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	1 0023030
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 0,	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
23453 12-26	-23		Schedule B (Form 990) (2023

Name of organization **Employer identification number** BALTIMORE SYMPHONY ORCHESTRA, 52-0629696 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

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

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number BALTIMORE SYMPHONY ORCHESTRA 52-0629696 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Nο Yes b If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-.

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

chedule C (Form 990) 2023	BALTIMORE	SYMPHONY	ORCHESTRA,	INC.	52-0629696	Page
			· · I' · · FO4/-\/0\	1 (*) 1	E	-

		MORE SYMPHONY ORCHESTRA, INC.		629696 Page 2					
Pa		on is exempt under section 501(c)(3) and file	ed Form 5768 (ele	ction under					
	section 501(h)).								
4	Check if the filing organization belor	ngs to an affiliated group (and list in Part IV each affiliated	group member's name	, address, EIN,					
	expenses, and share of excess lobbying expenditures).								
3	Check if the filing organization chec	ked box A and "limited control" provisions apply.							
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals								
1:	a Total lobbying expenditures to influence pul	olic opinion (grassroots lobbying)	50,126.						
	Total lobbying expenditures to influence a le								
	, .	d 1b)	50,126.						
		,	28,606,489.						
	Total exempt purpose expenditures (add line		28,656,615.						
		ount from the following table in both columns.	1,000,000.						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:							
	not over \$500,000,	20% of the amount on line 1e.							
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.							
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.							
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000							
	over \$17,000,000,	\$1,000,000.							
	g Grassroots nontaxable amount (enter 25% of	f line 1f)	250,000.						
	1 Subtract line 1g from line 1a. If zero or less,	enter -0-	0.						
	i Subtract line 1f from line 1c. If zero or less,	enter -0-	0.	<u></u>					
	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720								
	reporting section 4911 tax for this year? Yes No								
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)								

,					
Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	12,997.	68,593.	63,272.	50,126.	194,988.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	12,997.	68,593.	63,272.	50,126.	194,988.

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	
	501(c)(6).				
				Yes	No
4	Were substantially all (90% or more) dues received nondeductible by members?		1		
1					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
2 3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3		
2 3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec		•
2 3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	n 501(c)(5), or sec		3, is
2 3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	n 501(c)(5), or sec b) Part I		3, is
2 3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	n 501(c)(5 "No" OR (), or sec		3, is
2 3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	n 501(c)(5 "No" OR (), or sec b) Part I		3, is
2 3 Par 1 2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	n 501(c)(5 "No" OR (3), or sec b) Part I		3, is
2 3 Par 1 2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	n 501(c)(5 "No" OR (3), or sec b) Part I		3, is
2 3 Par 1 2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	n 501(c)(5 "No" OR (3), or sec b) Part I		3, is
2 3 Par 1 2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	n 501(c)(5 "No" OR (3), or sec b) Part I 1 2a 2b 2c		3, is
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2 3 Par 1 2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162 (e) dues	n 501(c)(5 "No" OR (3), or sec b) Part I 1 2a 2b 2c		3, is
2 3 Par 1 2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	n 501(c)(5 "No" OR (3), or sec b) Part I 2a 2b 2c 3		3, is
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Employer identification number

BALTIMORE SYMPHONY ORCHESTRA, INC. 52-0629696

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
_	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
Pa			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreating		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.	30	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			2b
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included on line 2c acqui		
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		'
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		-
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial staten	nents that describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95		
	of art, historical treasures, or other similar assets held for pub		
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	8, 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 fur	therance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
L.	Assets included in Form 000 Part V		Φ

332051 09-28-23

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

. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line

Complete if the organization answered Tes on Form 990, Part IV, line Tra. See Form 990, Part A, line To.					
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land					
b Buildings					
c Leasehold improvements		2,410,946.	39,705.	2,371,241.	
d Equipment		3,340,463.	2,995,253.	345,210.	
e Other					
Total. Add lines 1a through 1e. (Column (d) must equa	2,716,451.				

Part XII	Schedule D (Form 990) 2023 BALTIMORE SY	MPHONY ORCHE	STRA, INC.	52-0629696 Page 3
(a) Bescription of security or category (excluding reme 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) (C) (C) (C) (B) (C) (C) (C) (C) (C) (C) (D) (E) (F) (G) (F) (G) (P) (G) (P) (A) (A) (B) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C				<u> </u>
(1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (C) (D) (C)			_	
(2) Closely held equity interests (3) Other (4) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10		(b) Book value	(c) Method of Valuation: Cost of	or end-of-year market value
(3) Other (A) (B) (C) (C) (D) (E) (F) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (G) (H) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G				
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(B) (C) (D) (D) (D) (E) (E) (F) (G) (G) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G				
(C) (D) (E) (F) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (F) (G) (G) (F) (F) (G) (G) (F) (F) (G) (G) (F) (F) (F) (G) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F				
(D) (E) (F) (G) (H) (H) (III) (F) (G) (H) (III) (IIII) (III) (III) (III) (III) (III) (III) (IIII) (III) (IIII) (IIIIII) (IIIIIIII	- ; /			
(E) (F) (G) (G) (H) Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation. Cost of end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Part IXI Other Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) Total. (Col. (b) must equal Form 990, Part X, line 15, col. (B)) (9) (9) Total. (Col. (b) must equal Form 990, Part X, line 15, col. (B)) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)) Part X Other Labilities Complete if the grapanization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability	- ; ;			
(F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part N, line 11c. See Form 990, Part X, ling 13. (a) Description of investment (b) Book value (c) Method of valuations Cost of end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part XZ Complete if the organization answered "Yes" on Form 990, Part N, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part XZ Other Assets Complete if the organization answered "Yes" on Form 990, Part N, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 930, Part X, line 15, col. (B)) Part XZ Other Liabilities Complete if the gragnalization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value	- ; /			
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1. (a) Description of liability (b) Book value	Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
		on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, lir	ne 25.
<u> </u>	1. (a) Description of liability		· · · · · · · · · · · · · · · · · · ·	(b) Book value
(1) Federal income taxes				
				2,650,879.
(3) DUE TO AFFILIATES 10,768,15				10,768,154.
(4) RIGHT OF USE LIABILITIES -				

(2) ACCRUED PENSION COSTS
(3) DUE TO AFFILIATES
(4) RIGHT OF USE LIABILITIES (5) OPERATING
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

2,650,879.
2,650,879.
110,768,154.

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

PART V, LINE 4:

1

2

1 2

THE ENDOWMENT IS HELD BY SUPPORTING ORGANIZATION. THE ENDOWMENT IS USED TO SUPPORT THE CHARITABLE, LITERARY AND EDUCATIONAL PURPOSES ASSOCIATED WITH THE PROMOTION OF AN APPRECIATION OF ORCHESTRAL AND SYMPHONIC MUSIC.

PART X, LINE 2:

INCOME TAXES (ASC 740), PRESCRIBES A RECOGNITION THRESHOLD AND A ASC 740, MEASUREMENT ATTRIBUTE FOR THE CONSOLIDATED FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AS WELL AS GUIDANCE ON DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES AND CONSOLIDATED FINANCIAL STATEMENT REPORTING DISCLOSURES.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

compensated at least \$5,000 by the organization.

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization		Employer identification number
BALTIMORE SYMPHO	ONY ORCHESTRA, INC.	52-0629696
Part I Fundraising Activities. Complete if the required to complete this part.	organization answered "Yes" on Form 990, Par	t IV, line 17. Form 990-EZ filers are not
1 Indicate whether the organization raised funds through	any of the following activities. Check all that a	pply.
a X Mail solicitations	e X Solicitation of non-government gran	nts
b X Internet and email solicitations	f X Solicitation of government grants	
c X Phone solicitations	g X Special fundraising events	
d X In-person solicitations		
2 a Did the organization have a written or oral agreement	with any individual (including officers, directors	, trustees, or
key employees listed in Form 990, Part VII) or entity in b If "Yes," list the 10 highest paid individuals or entities		_

(iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) COMMUNITY COUNSELING SERVICE Yes No COMPANY - PO BOX 824885 CAMPAIGN CONSULTING Х 381,497 0. 381 497 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. MD, VA, PA

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

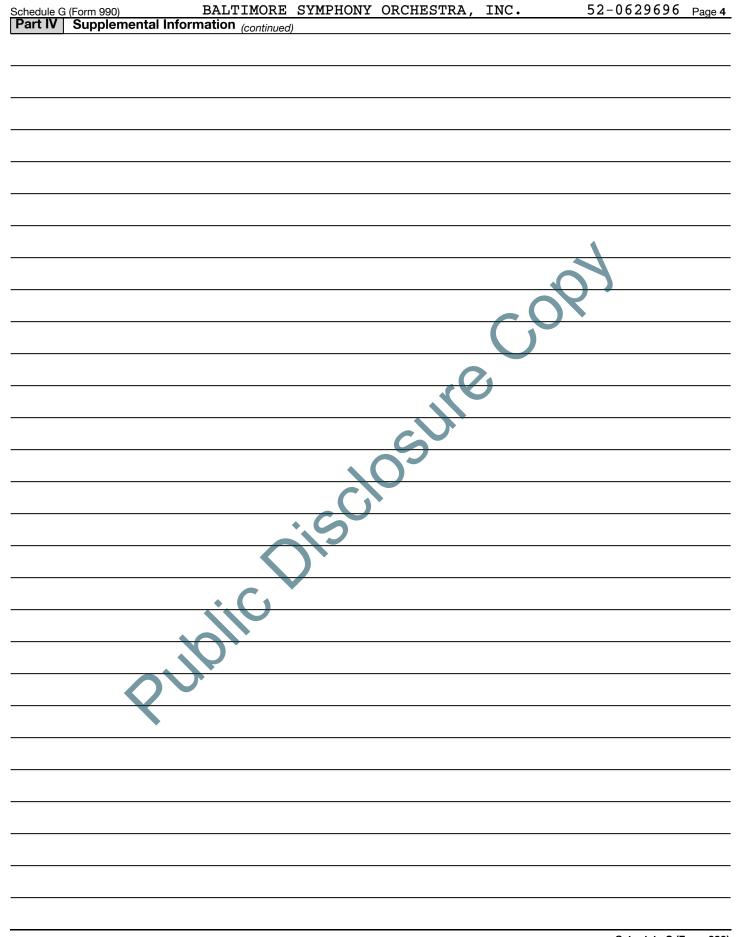
Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5.00

		of fundraising event contributions and gro				s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			GALA			col. (c))
Φ			(event type)	(event type)	(total number)	(-)/
eun			1 000 000			1 000 000
Revenue	1	Gross receipts	1,208,883.			1,208,883.
_			711 000			711 000
	2	Less: Contributions	711,200.			711,200.
	_	Over a fine and a fine distribute line O	107 602			107 602
	3	Gross income (line 1 minus line 2)	497,683.			497,683.
	1	Cash prizes				
	7	Od311 p1/203				
	5	Noncash prizes				
es						
ens	6	Rent/facility costs	40,972.			40,972.
Direct Expenses						
əct	7	Food and beverages	325,041.		1	325,041.
ä						
		Entertainment	76,007.			76,007.
		Other direct expenses	470,779.	,(/)		470,779.
		Direct expense summary. Add lines 4 through	. ,			912,799.
Pa	rt	Net income summary. Subtract line 10 from line III Gaming. Complete if the organization a		990 Part IV line 19 or	reported more than	-413,110.
		\$15,000 on Form 990-EZ, line 6a.	answered res on rollin	330, 1 alt 17, 11110 13, 01	reported more than	
		,	() 5:	(b) Pull tabs/instant		(d) Total gaming (add
Jue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
æ	1	Gross revenue				
			+ 6			
S	2	Cash prizes				
ense						
Direct Expenses	3	Noncash prizes				
St.		Double of the colline and the				
Ë	4	Rent/facility costs				
	5	Other direct expenses				
		Carlot direct experieses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming ac				Yes No
b	IT "	No," explain:				
	_					
10a	W	ere any of the organization's gaming licenses re	voked suspended or te	rminated during the tax v	/ear?	Yes No
		Yes," explain:	· · · · · · · · · · · · · · · · · · ·	-	,	
-	_					

Schedule G (Form 990) 2023

332082 09-13-23

Sch	edule G (Form 990) 2023	BALTIMORE	SYMPHONY	ORCHESTRA,	INC.	52-0629696	Page 3
11	Does the organization conduct of	aming activities with r	nonmembers?			Yes [No
12	Is the organization a grantor, bei	•			•		
	to administer charitable gaming?	?				Yes	No
	Indicate the percentage of gamin					1 1	
	The organization's facility						<u>%</u>
	An outside facility						<u>%</u>
14	Enter the name and address of t	ne person who prepar	es the organization	n's gaming/special ev	ents books and recor	ds:	
	Name						
	Address						
15a	Does the organization have a co	ntract with a third part	ry from whom the	organization receives	gaming revenue?	Yes [No
ŀ	If "Yes," enter the amount of gar	ming revenue received	by the organization	on \$	and the ar	nount	
	of gaming revenue retained by the			<u>- </u>			
(If "Yes," enter name and addres						
	Name					•	
	Address						
16	Gaming manager information:			.0	>,		
	Nama						
	Name						
	Gaming manager compensation	\$		S			
	Description of services provided						
	Description of services provided						
			+ 62				
	Director/officer	Employee	Inde	pendent contractor			
	Mandatory distributions:						
á	a Is the organization required under						—
	retain the state gaming license?					······································	No
K	 Enter the amount of distributions organization's own exempt active 			ea to other exempt o	rganizations or spent	in the	
Pa	rt IV Supplemental Info			guired by Part I, line 2	b. columns (iii) and (v); and Part III, lines 9, 9b	. 10b.
	15b, 15c, 16, and 17b, a		•			,,,,	, ,
		.	•				
SC	HEDULE G, PART I,	LINE 2B, I	IST OF TE	N HIGHEST I	PAID FUNDRA	ISERS:	
/ т) NAME OF FUNDRAI	CED. COMMIN	ITMV COIING	ETTMC CEDV	CE COMDANY		
<u>(I</u>) NAME OF FUNDRAL	SEK: COMMON	IIII COUNS	ELING SEKV.	CE COMPANI		
(I) ADDRESS OF FUND	RAISER: PO	BOX 82488	5. PHILADEI	DPHIA. PA	19182	
<u>\ _</u>	,			<u> </u>			
PA	RT I, LINE 2B, CC	LUMN (V):					
CO	MMUNITY COUNSELIN	IC GEBATCE C	ים עמגקא∩י	OMIDED CYMI	DATCH CONCI	T.TTNG	
<u></u>	THIONTII COUNSELLIN	IG DEVATOR C	OMEANI PR	OVIDED CAMI	DOMOO MOIA	TITIG,	
IN	TERIM SUPPORT STA	FF AND STRA	TEGIC DIR	ECTION TO A	A COMPREHEN	SIVE	
	NDRAISING CAMPAIG						



SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

Open to Public

52-0629696

Name of the organization BALTIMORE SYMPHONY ORCHESTRA, INC.

Inspection **Employer identification number**

OMB No. 1545-0047

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

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

Schedule J (Form 990) 2023

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	5		reported as deferred on prior Form 990
(1) MR. MARK HANSON	(i)	336,010.	0.	6,110.	20,000	35,589.	397,709.	0.
PRESIDENT AND CEO	(ii)	84,002.	0.	1,528.	5,000.	8,897.		0.
(2) MR. EDWARD CARNEY	(i)	275,928.	0.	396.	0.	44,766.	321,090.	0.
CONCERT MASTER	(ii)	0.	0.	0.	9	0.	0.	0.
(3) MS. AGNIESZKA RAKHMATULLAEV	(i)	203,687.	0.	60.	0.	44,736.	248,483.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MS. ALLISON BURR-LIVINGSTONE	(i)	141,396.	0.	40.	0.	33,927.		0.
SR. VP AND CHIEF ADV. OFFICER	(ii)	47,132.	0.	14.	0.	11,309.		0.
(5) MS. KATHERINE NEEDLEMAN	(i)	168,426.	0.	90.	900.	43,766.	213,182.	0.
MUSICIAN	(ii)	0.	0.	0	0.	0.	0.	0.
(6) MR. BRIAN PRECHTL	(i)	164,589.	0.	396.	900.	39,215.	205,100.	0.
DIRECTOR OF EDU & COMM ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MR. JOHN G. MCLEAN, JR.	(i)	141,344.	0.	72.	0.	18,087.		0.
SR. VP & CFO (PART YEAR)	(ii)	35,336.	0-	18.	0.	4,522.		0.
(8) MS. CYRINA R. YARBROUGH	(i)	176,759.	0.	54.	0.	13,172.		0.
SR. VP & CHIEF MKTG. & COMM. OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MR. TODD PRICE	(i)	165,565.	0.	90.	0.	23,628.	189,283.	0.
HEAD STAGEHAND	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MR. MARIO SERRUTO	(i)	161,490.	0.	90.	0.	23,544.	185,124.	0.
ASSISTANT HEAD STAGEHAND	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4B:
DURING CALANDER YEAR 2023, THE FOLLOWING PARTICIPATED IN THE BALTIMORE
SYMPHONY ORCHESTRA, INC. SUPPLEMENTAL EXECUTIVE DEFERRED COMPENSATION PLAN
("SERP"):
MARK HANSON \$25,000
• 62

SCHEDULE M (Form 990)

Noncash Contributions

Open to Public

OMB No. 1545-0047

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Inspection Employer identification number

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 (EVENT MATERIALS) X 8 44,625 · FMV 26 Other (INSTRUMENTS) X 1 4,400 · FMV 27 Other (Other () 28 Other ()		BALTIMORE SY	MPHONY	ORCHESTRA	A, INC.	52-0	629696	5
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23 Scientific specimens 24 Archeological artifacts 25 Other (EVENT MATERIALS) X 8 44,625.FMV 26 Other (INSTRUMENTS) X 1 4,400.FMV 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 V, Donee Acknowledgement 29 Suring the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 29 b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a X 32b If "Yes," describe in Part II.	21	Taxidermy						
24 Archeological artifacts 25 Other (EVENT MATERIALS) 26 Other (INSTRUMENTS) 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 V, Donee Acknowledgement 29 Very Nomber of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Very Nomber of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Very Nomber of Forms 8283 received by the organization during the tax year for contributions for which the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a X b If "Yes," describe in Part II.	22	***************************************		•				
25 Other (EVENT MATERIALS) X 8 44,625. FMV 26 Other (INSTRUMENTS) X 1 4,400. FMV 27 Other (23	Scientific specimens						
26 Other (INSTRUMENTS X 1 4,400 • FMV 27 Other (24							
27 Other (25	,			44,625.	FMV		
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 V, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 4 X 5 If "Yes," describe in Part II.	26	Other (INSTRUMENTS)	X	1	4,400.	FMV		
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? By If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? By If "Yes," describe in Part II.	27	Other (
for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 4 If "Yes," describe in Part II.	28							
During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 10 b If "Yes," describe the arrangement in Part II. 11 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 12 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 b If "Yes," describe in Part II.	29							
During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 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.		for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			T
must hold for at least 3 years from the date of the initial contribution, and which isn't 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 nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 43 X 43 B If "Yes," describe in Part II.							Yes	No_
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 nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 43 X 43 X 53 B If "Yes," describe in Part II.	30a	•						
b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a X 32b If "Yes," describe in Part II.								1 37
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 31 X 32 X 43 B If "Yes," describe in Part II.	_		·				30a	A
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.					af amilian abandan da sa sa 19 - 1	:O		v
contributions? b If "Yes," describe in Part II.			-	•	•	IUNS?	31	 ^
b If "Yes," describe in Part II.	32a			_	•		00-	v
							32a	1^
ii the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,		•	alumn (=\ f=	va tumo of	, for which column (a) is also	lead		
	3 3	describe in Part II	olullili (C) fol	a type of property	nor which column (a) is ched	keu,		

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

Schedule M (Form 990) 2023

332142 09-11-23

Schedule M (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

BALTIMORE SYMPHONY ORCHESTRA, INC.

Employer identification number 52-0629696

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BSO IS AN INTERNATIONALLY RECOGNIZED SYMPHONY ORCHESTRA THAT HAS

ATTRACTED A DEVOTED NATIONAL AND INTERNATIONAL FOLLOWING WHILE

MAINTAINING DEEP BONDS THROUGHOUT MARYLAND WITH INNOVATIVE EDUCATION

AND COMMUNITY OUTREACH INITIATIVES.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE, A

SUB-COMMITTEE OF THE BOARD OF DIRECTORS, PRIOR TO SUBMISSION. A COPY OF THE

FORM 990 WAS ALSO EMAILED TO THE FULL BOARD FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 120:

THE BSO HAS A CONFLICT OF INTEREST POLICY THAT IS AVAILABLE TO ALL EMPLOYEES IN THE STAFF EMPLOYEE HANDBOOK. THE HANDBOOK IS ISSUED TO EVERY AND THE EMPLOYEE MUST SIGN TO SAY THAT THEY HAVE NEW EMPLOYEE OF THE BSO READ AND UNDERSTOOD THE INFORMATION PROVIDED. THE CONFLICT OF INTEREST POLICY IS MONITORED BY MANAGEMENT WITH EMPHASIS ON THOSE AREAS THAT ARE ESPECIALLY SUSCEPTIBLE TO POSSIBLE CONFLICTS. ANY POTENTIAL CONFLICTS WITH ON AN INDIVIDUAL BASIS BY THE PRESIDENT/CEO AND THE DIRECTOR OF HUMAN RESOURCES AS NECESSARY. THE POLICY AND ITS APPLICATION SHALL BE REVIEWED ANNUALLY FOR THE INFORMATION AND GUIDANCE OF DIRECTORS AND STAFF MEMBERS, EACH OF WHOM HAS A CONTINUING RESPONSIBILITY OFFICERS, TO SCRUTINIZE THEIR TRANSACTIONS AND OUTSIDE BUSINESS INTERESTS AND RELATIONSHIPS FOR POTENTIAL CONFLICTS OF INTEREST, AND MAKE SUCH

DISCLOSURES AS DESCRIBED IN THIS POLICY. EACH DIRECTOR AND SENIOR STAFF

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Schedule O (Form 990) 2023 Page **2**

Name of the organization

BALTIMORE SYMPHONY ORCHESTRA, INC.

52-0629696

MEMBER WILL BE ASKED TO COMPLETE A CERTIFICATION OF AGREEMENT WITH THE

POLICY AND DISCLOSURE OF ANY KNOWN CONFLICTS OF INTEREST UPON HIS OR HER

ELECTION OR RE-ELECTION TO THE BOARD OR COMMENCEMENT OF EMPLOYMENT AND

FORM 990, PART VI, SECTION B, LINE 15A:

ANNUALLY THEREAFTER.

BSO FORMED A COMPENSATION COMMITTEE TO SPECIFICALLY DEAL WITH THE CONTRACT

OF THE PRESIDENT AND CEO. THE COMMITTEE INITIATED RESEARCH TO DETERMINE

REASONABLE COMPENSATION. THAT RESEARCH WAS BASED ON COMPENSATION

INFORMATION RECEIVED FROM ORCHESTRAS OF COMPARABLE SIZE IN REVENUE, SEASON

LENGTH AND ORCHESTRA SIZE. UPON REVIEW OF THE DATA RECEIVED, THE COMMITTEE

REACHED A CONCLUSION AND THE SPECIFIC CONTRACT WAS NEGOTIATED DIRECTLY WITH

THE EMPLOYEE. IT IS THE INTENTION OF THE BOARD OF DIRECTORS TO KEEP THE

COMPENSATION COMMITTEE ACTIVE AND AVAILABLE TO HANDLE COMPENSATION ISSUES

OF THE PRESIDENT AND CEO.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,
FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACTUAL SERVICES:

PROGRAM SERVICE EXPENSES 777,138.

MANAGEMENT AND GENERAL EXPENSES 541,224.

FUNDRAISING EXPENSES 31,421.

TOTAL EXPENSES 1,349,783.

CONDUCTORS & GUEST ARTISTS:

Schedule O (Form 990) 2023	Page 2
Name of the organization BALTIMORE SYMPHONY ORCHESTRA, INC.	Employer identification number 52-0629696
PROGRAM SERVICE EXPENSES	2,318,375.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,318,375.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	3,668,158.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PENSION RELATED CHANGES INCLUDING NET PERIODIC PENSION	0,
COSTS	2,537,697.
FORM 990, PAGE 12, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
<u>'iO</u>	

SCHEDULE R (Form 990)

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

Attach to Form 990.

BALTIMORE SYMPHONY ORCHESTRA, INC.

Employer identification number

52-0629696

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes"	on Form 990, Part IV, line 33	3.	•			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco		r assets Direct	(f) controlling entity	g
	_		O_{\circ}				
	-	16					
	-	50					
	-						
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, b	ecause it had one	or more related tax-ex	empt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	contr ent	g) 512(b)(13) rolled tity?
BALTIMORE SYMPHONY ENDOWMENT TRUST - 77-0659339, 1212 CATHEDRAL STREET,	SUPPORT APPRECIATION OF ORCHESTRAL AND SYMPHONIC				BALTIMORE SYMPHONY	Yes	No
BALTIMORE, MD 21201	MUSIC	MARYLAND	501(C)(3)	LINE 12A, I	ORCHESTRA, INC.	X	

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

Schedule R (Form 990) 2023

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	I		l	1		I	т —			1	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	General or	Percentage
of related organization		(state or	entity	(related, unrelated, lexcluded from tax under	income	end-of-year assets	alloca	ations?	amount in box	partner?	ownership
		foreign country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes No	
						4					
						(()					
											
					· (/)						
					7						
-											

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

(a) Name, address, and EIN of related organization	(b) Primary ac ti vity	(c) Legal domicile (state or	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	(g) Share of end-of-year	(h) Percentage ownership	(i Sec 512(t contr	tion b)(13) rolled
·		foreign country)	,	or trust)		assets		ent	No
CATHEDRAL PARKING, INC 52-1239270									
1212 CATHEDRAL STREET									ĺ
BALTIMORE, MD 21201	PARKING GARAGE	MD	N/A	C CORP	N/A	N/A	N/A	X	
	,O								
									
	-								
									<u> </u>

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)			<u>\</u>	1c	X	
				1d	Х	
e Loans or loan guarantees by related organization(s)				1e	Х	
f Dividends from related organization(s)				1f		_X_
g Sale of assets to related organization(s)				1g		X
h Purchase of assets from related organization(s)				1h		X
i Exchange of assets with related organization(s)				1i		X
j Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I Performance of services or membership or fundraising solicitations for related organ				11		X
m Performance of services or membership or fundraising solicitations by related organ	nization(s)			1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n	X	
Sharing of paid employees with related organization(s)				10	Х	
p Reimbursement paid to related organization(s) for expenses				1 p		X
q Reimbursement paid by related organization(s) for expenses				1q	Х	
r Other transfer of cash or property to related organization(s)				1r		X
s Other transfer of cash or property from related organization(s)	•			1s		X
2 If the answer to any of the above is "Yes," see the instructions for information on wh	ho must complete th	is line, including covered re	elationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	olved/		
(1) BALTIMORE SYMPHONY ENDOWMENT TRUST	С	8,560,000.	FMV			
(2) BALTIMORE SYMPHONY ENDOWMENT TRUST	E	2,620,000.	FMV			
(3) BALTIMORE SYMPHONY ENDOWMENT TRUST	0	168,030.	FMV			
(4) BALTIMORE SYMPHONY ENDOWMENT TRUST	E	10,768,154.	FMV			
(5)						
	l					

Schedule R (Form 990) 2023

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)	(d)	(e) Are all partners sec. 501(c)(3) orgs.?	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners sec.	Share of	Share of	Dispropo tionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General o	Percentage
of entity		(state or foreign	(Telaled, ulifelaled, excluded from tax under	orgs.?	total	end-of-year	allocation	of Schedule K-1	partner?	ownership
		country)	sections 512-514)	Yes No	income	assets	Yes N	(Form 1065)	Yes No	
						•				
				7						
			• 0.							
		* .	5							
			•							
	•									
)								
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	V						++		+ +	
										I

332165 09-28-23 Schedule R (Form 990) 2023

Form	990-T	n	OMB No. 1545-0047				
				tax under section 6033(e			0000
		For ca	llendar year 2023 or other tax year beginning	$\overline{ ext{SEP}}$ $\overline{ ext{1,}}$ $\overline{ ext{2023}}$, and endir	_{ng} <u>AUG 31, 20</u>	<u>24</u> .	2023
Departm Internal I	ent of the Treasury Revenue Service		Go to www.irs.gov/Form9 Do not enter SSN numbers on this for	90T for instructions and the late n as it may be made public if your o			Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed.		Name of organization (Check I	ox if name changed and see instructi	ons.)	D Em	ployer identification number
 В Fxe	mpt under section	Print	BALTIMORE SYMPHON	Y ORCHESTRA, INC	•	5	52-0629696
	501(c)(3)	or	Number, street, and room or suite no			E Gro	oup exemption number e instructions)
_	408(e) 220(e)	Туре	1212 CATHEDRAL ST	•		(56	e instructions)
	408A 530(a) 529(a) 529A		City or town, state or province, count BALTIMORE, MD 21	ry, and ZIP or foreign postal code 201–5517		F	Check box if
	020(u)025/(C Bo	ook value of all assets at end of year		187,707.	┥ └	an amended return.
G Ch	neck organization			501(c) trust 401(a) trust	Other trust	State	college/university
		-,,,,,	6417(d)(1)(A) Applicable entit	()			,
H C	neck if filing only to	o claim		Refund shown on Form 243	B9 Elective paym	ent amo	ount from Form 3800
			ation filing a consolidated return w				
			ed Schedules A (Form 990-T)				1
K Dı	uring the tax year,	was th	e corporation a subsidiary in an aff				Yes X No
			d identifying number of the parent				
	ne books are in car	e of	ANN BROMERY	1	elephone number	410-	783-8090
Part	t I Total Unr	elate	d Business Taxable Incom	е			
1	Total of unrelated	d busine	ess taxable income computed fron	all unrelated trades or business	es (see instructions)	. 1	0.
2	Reserved				24	2	
3	Add lines 1 and 2	<u></u>		 		3	
4			(see instructions for limitation rule			4	0.
5	Total unrelated b	usiness	s taxable income before net operat	ing losses. Subtract line 4 from li	ne 3	. 5	
6	Deduction for net	t opera	ting loss. See instructions			6	
7	Total of unrelated	busine	ess taxable income before specific	deduction and section 199A dec	luction.		
	Subtract line 6 fro	om line	5			7	
8	Specific deduction	n (gen	erally \$1,000, but see instructions	for exceptions)		8	1,000.
9	Trusts. Section 1	199A de	eduction. See instructions	_()		9	
10	Total deductions	s. Add	lines 8 and 9			10	1,000.
11			cable income. Subtract line 10 fro	m line 7. If line 10 is greater than	line 7, enter zero	. 11	0.
Part	II Tax Com	putat	ion	•			
1	Organizations ta	xable	as corporations. Multiply Part I, li	ne 11 by 21% (0.21)		1	0.
2			rates. See instructions for tax cor		ount on		
	Part I, line 11, fro	m:	Tax rate schedule or	Schedule D (Form 1041)		2	
3	Proxy tax. See in					3	
4	Other tax amoun	ts. See	instructions			4	
5	Alternative minim	ıum tax	·			5	
6			acility income. See instructions			6	
7			gh 6 to line 1 or 2, whichever appli	es		7	0.
Part					<u> </u>		
1a		-	prations attach Form 1118; trusts a		<u>a </u>	_	
b	Other credits (see		,		b	_	
С			. Attach Form 3800 (see instruction		С	4	
d			imum tax (attach Form 8801 or 88		d		
е	Total credits. Ac		•			<u>1e</u>	
2			art II, line 7	I	1	2	0.
3a	Amount due from				.		
b	Amount due from			·····	b	-	
С	Amount due from			·····	ic .	-	
d	Amount due from				d		
e	Other amounts d	•	,				^
f	I otal amounts du	ıe. Add	I lines 3a through 3e			3f	0.
4			nd 3f (see instructions).				
_			x amount here				0.
5	Current net 965 t	ax liabi	ility paid from Form 965-A, Part II,	column (k)		5	1 0.

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or **Print 5**2-0629696 BALTIMORE SYMPHONY ORCHESTRA, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 1212 CATHEDRAL STREET return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. 21201-5517 BALTIMORE, MD Enter the Return Code for the return that this application is for (file a separate application for each return 07 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ Form 4720 (other than individual) 01 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) Form 8870 12 05 Form 5330 (individual) Form 990-T (trust other than above) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A ● After you enter your Return Code, complete either Part II or Part III. Part 间, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of ANN BROMERY 1212 CATHEDRAL STREET - BALTIMORE, MD 21201-5517 Telephone No. 410-783-8090 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 . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until JULY 15 , 20 **25** , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ____ calendar year 20 _____ or X tax year beginning _____ SEP 1 __ , 20 <u>23</u> , and ending _____ AUG 31 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 Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 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. 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. Зс

Form 990-T (2023) Page 2 Part III Tax and Payments (continued) Payments: Preceding year's overpayment credited to the current year 6a Current year's estimated tax payments. Check if section 643(g) election 6b Tax deposited with Form 8868 C 6с Foreign organizations: Tax paid or withheld at source (see instructions) 6d Backup withholding (see instructions) 6e Credit for small employer health insurance premiums (attach Form 8941) 6f Elective payment election amount from Form 3800 6g Payment from Form 2439 6h Credit from Form 4136 6i i Other (see instructions) 6i Total payments. Add lines 6a through 6j 8 Estimated tax penalty (see instructions). Check if Form 2220 is attached 8 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed 9 9 10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid Enter the amount of line 10 you want: Credited to 2024 estimated tax Part IV | Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority Yes No over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country During the tax year, did the organization receive a distribution from, or was it the grant of or transferor to, a 2 foreign trust? If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Do not include any post-2017 NOL carryover \$ Enter available pre-2018 NOL carryovers here shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6. Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions. **Business Activity Code** Available post-2017 NOL carryover \$ \$ Reserved for future use Reserved for future use Part V Supplemental Information Provide any additional information. See instructions. 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, laration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with Here CFO Signature of officer instructions)? Yes Date Title Print/Type preparer's name Date Preparer's signature Check self-employed Paid LORI S. BURGHAUSER 07/14/25 LORI S. BURGHAUSER P00370694 Preparer SC&H GROUP, INC. 20-5991824 Firm's name Firm's EIN **Use Only** 910 RIDGEBROOK ROAD Firm's address SPARKS, MD 21152 (410) 403-1500 Phone no.

Form 990-T (2023)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2023

Open to Public Inspection for

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

	THOUSING OUT THOS						50 I(c)(3) Organizations Only
A N	lame of the organization BALTIMORE SYMPHONY ORCHESTRA, INC	с.			B Employer 52-06		
<u>c</u> ს	Unrelated business activity code (see instructions) 1				D Sequence	e: 1	L of 1
E [Describe the unrelated trade or business N/A						
	t I Unrelated Trade or Business Income		(A) Incor	ne	(B) Expense	s	(C) Net
1a	Gross receipts or sales						
b	Less returns and allowances c Balance	1c					
2	Cost of goods sold (Part III, line 8)	2				1	
3	Gross profit. Subtract line 2 from line 1c	3					
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form						
	1120)). See instructions	4a			~ ())		
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b					
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5		(71			
6	Rent income (Part IV)	6	4	U			
7	Unrelated debt-financed income (Part V)	7					
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Part VI)	8	6				
9	Investment income of section 501(c)(7), (9), or (17)						
	organizations (Part VII)	9					
10	Exploited exempt activity income (Part VIII)	10					
11	Advertising income (Part IX)	11					
12	Other income (see instructions; attach statement)	12					
13	Total. Combine lines 3 through 12	13		0.			
	Deductions Not Taken Elsewhere. See instruct directly connected with the unrelated business in	come	e 				s must be
1	Compensation of officers, directors, and trustees (Part X)					1	
2	Salaries and wages					3	
3	Repairs and maintenance					4	
4	Bad debts						
5 6	Interest (attach statement). See instructions Taxes and licenses					5 6	
7	Depreciation (attach Form 4562). See instructions		;	,			
8	Less depreciation claimed in Part III and elsewhere on return			a		8b	
9	Depletion					9	
10	Contributions to deferred compensation plans					10	
11	Employee benefit programs					11	
12	Excess exempt expenses (Part VIII)					12	
13	Excess readership costs (Part IX)					13	
14	Other deductions (attach statement)					14	
15	Total deductions. Add lines 1 through 14					15	0.
16	Unrelated business income before net operating loss deduction. So					· <u>·</u>	<u></u>
.5	column (C)					16	0.
17	Deduction for net operating loss. See instructions					17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16					18	

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

n -	_	_	
rа	O	e	- 2

	ule A (Form 990-T) 2023				Page 2
Part	Entormet	hod of inventory valuat	ion		
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter I				
9	Do the rules of section 263A (with respect to property				Yes No
Part	· · · · ·		_		
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See inst	ructions.	
	A 🔛				
	В 🔛				
	c				
	D	_			
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds		0		
	50% or if the rent is based on profit or income)		10		
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
	g	C			•
3	Total rents received or accrued. Add line 2c, columns A	A through D. Enter bere	and on Part I line 6	column (A)	0.
	Deductions directly connected with the income	Tanough B. Enton	and on raici, mio o,	Solariir (7 y	1
4	in lines 2a and 2b (attach statement)				
7	mines za and zb (attach statement)				
5	Total deductions. Add line 4, columns A through Deci	nter here and on Part I	line 6 column (B)		0.
Part		ee instructions)	, iii i c c, coldi i ii (b)		
1	Description of debt-financed property (street address,		heck if a dual-use. See	instructions	
•	A	,,,			
	В				
	c \				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
_					
3	property Deductions directly connected with or allocable				
3	to debt-financed property				
	Straight line depreciation (attach statement)				
a					
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
_	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				<u> </u>
8	Total gross income (add line 7, columns A through D)	. Enter here and on Pa	rt I, line 7, column (A)	<u> </u>	0.
			<u> </u>		•
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thr				
11	Total dividends-received deductions included in line	10			0.

Part	VI Interest, Annu	uities, Ro	oyalties, and Re	ents Fro	m Contro	lled Or	rganization	S (see instru	ctions)	Page 3
		-						lled Organization		
	Name of controlle organization	d	2. Employer identification number	incon	unrelated ne (loss) structions)	4. Tota	al of specified nents made	5. Part of column that is include controlling or tion's gross i	umn 4 d in the ganiza-	5. Deductions directly connected with income in column 5
(1)										
(2)										
(3)										
(4)										
		1 .			Controlled O				1	5 I II II II
	. Taxable Income	ir	Net unrelated acome (loss) e instructions)	1	otal of specif yments mad		that is inc	of column 9 cluded in the organization's income		Deductions directly connected with ome in column 10
(1)										
(2)										
(3)									77	
(4)									1)	
							Enter here	nns 5 and 10. and on Part I, column (A).	Ente	columns 6 and 11. here and on Part I, ne 8, column (B).
Totals								0		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Organ	nization (s	ee instructions	-	
		cription of			2. Amou incon	nt of	3. Deduction directly connumber (attach state)	ected (attach	et-asides statemen	5. Total deductions and set-asides (add cols 3 and 4)
(1) N	/A					0.	•	0.	0	. 0.
(2)										
(3)										
(4))				
Totals				5	Add amou column 2 here and o line 9, colu	Enter n Part I, Imn (A).				Add amounts in column 5. Enter here and on Part I, line 9, column (B).
Part	VIII Exploited E	xempt A	Activity Income	, Other T	han Adve	ertising	g Income	see instruction	s)	
1	Description of exploite	ed activity:								
2	Gross unrelated busin								2	
3	Expenses directly con	nected wit	h production of unr	elated busi	ness income	e. Enter h	nere and on Pa	art I,		
	line 10, column (B)								3	
4	Net income (loss) from	n unrelated	trade or business.	Subtract lir	ne 3 from line	e 2. If a ç	gain, complete			
_	lines 5 through 7								4	
5	Gross income from ac								5	
6 7	Expenses attributable Excess exempt expen								6	
'	4. Enter here and on F			, but do no	or enter more	= u iaii (ii	io amount off f	II IC	7	

Schedule A (Form 990-T) 2023

Part	IX Advertising Income				<u> </u>
1	Name(s) of periodical(s). Check box if reporting two	or more periodicals on a d	consolidated basis.		
	A				
	В 🔲				
	c				
	D				
Enter a	amounts for each periodical listed above in the corres	sponding column.			
		Α	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and on Part I	, line 11, column (A)			0.
а					
3	Direct advertising costs by periodical				0.
а	Add columns A through D. Enter here and on Part I	, line 11, column (b)			
4	Advertising gain (loss). Subtract line 3 from line				
•	For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter -0- on line 8				
5	Readership costs	***			
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is less		401		
	than line 6, enter -0-		10		
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain on		V		
	line 4, enter the lesser of line 4 or line 7		7		
а	Add line 8, columns A through D. Enter the greater		or -0- here and or	1	0.
Part	X Compensation of Officers, Director	ors, and Trustees	ee instructions)		<u> </u>
		(3)		3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
(1)				%	
(2)				%	
(3)		<u> </u>		%	
(4)	• (<u>)</u>			%	
	Enter here and on Part II, line 1				0.
Part	XI Supplemental Information (see inst	ructions)			
					

SCHEDULE 0 (Form 1120)

(Rev. December 2018) Department of the Treasury Internal Revenue Service

Consent Plan and Apportionment Schedule for a Controlled Group

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-L, 1120-PC, 1120-REIT, or 1120-RIC. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Name

Employer identification number

BALTIMORE SYMPHONY ORCHESTRA, INC.	52-0629696
Part I Apportionment Plan Information	
1 Type of controlled group:	
a X Parent-subsidiary group	
b Brother-sister group	
c Combined group	
d Life insurance companies only	
2 This corporation has been a member of this group:	A
a X For the entire year.	
b From, until	
3 This corporation consents and represents to:	~
a Adopt an apportionment plan. All the other members of this group are adopting an apportionment plan effective for	•
the current tax year which ends on, and for all succeeding tax years.	
b Amend the current apportionment plan. All the other members of this group are currently amending a previously	ad Para Assa
adopted plan, which was in effect for the tax year ending, and for all succe	eding tax
years. Terminate the current expertisement plan and not edent a new plan. All the other members of this group are not	
c Terminate the current apportionment plan and not adopt a new plan. All the other members of this group are not adopting an apportionment plan.	
d Terminate the current apportionment plan and adopt a new plan. All the other members of this group are adopting	
	d for all
succeeding tax years.	101 411
cuscouling tax yours.	
4 If you checked box 3c or 3d above, check the applicable box below to indicate if the termination of the current apportionment	
plan was:	
a Elected by the component members of the group.	
b Required for the component members of the group,	
5 If you did not check a box on line 3 above, check the applicable box below concerning the status of the group's	
apportionment plan (see instructions).	
a No apportionment plan is in effect and none is being adopted.	
An apportionment plan is already in effect. It was adopted for the tax year ending AUGUST 31, 2018	, and
for all succeeding tax years.	
6 If all the members of this group are adopting a plan or amending the current plan for a tax year after the due date	
(including extensions) of the tax return for this corporation, is there at least one year remaining on the statute of limitations	
from the date this corporation filed its amended return for such tax year for assessing any resulting deficiency? See	
instructions	
a Yes. (i) The statute of limitations for this year will expire on	
(ii) On, this corporation entered into an agreement with the Internal Revenue Service to extend the statute of limitations for purposes of assessment until	
התפהותו הפיניותם סטריונים גם פתניות מום שנתנוני טו ווווותמנוטוים וטו מווימים משפטשווים וו משפטשווים ווימים ווימים	
b No. The members may not adopt or amend an apportionment plan.	
10. The mornions may not adopt of amond an apportunition plan.	
7 If the corporation has a short tax year that does not include December 31, check the box. See instructions.	
For Paperwork Reduction Act Notice, see Instructions for Form 1120.	chedule O (Form 1120) (Rev. 12-2018)

Part II Apportionment (See instructions)					32 0023030 Fage 2
		(I-)		Apportionment	
(a) Group member's name and employer identification number		(b) Tax year end (Yr-Mo)	(c) Accumulated earnings credit	(d) Penalty for failure to pay estimated tax	(e) Other
1 BALTIMORE SYMPHONY ORCHESTRA, INC.	52-0629696	24-08			
2 CATHEDRAL PARKING, INC	52-1239270	24-08			
BALTIMORE SYMPHONY ENDOWMENT TRUST	77-0659339	24-08			
4					
5			7.9		
6					
7		0			
8		16			
9					
10	C				
Total	10				

Schedule O (Form 1120) (Rev. 12-2018)