Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form
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A F	or th	ne 2013 ca	alendar year, or tax year begin	ning 07/01, 2013	s, and ending	9		06/3	30 ,20 ₁₄	
_			lame of organization				Employer ide	entificati	on number	
B C	neck if ap	pplicable:	KANSAS CITY SYMPHONY							
	Addre		Ooing Business As				43-1297	7475		
	7		lumber and street (or P.O. box if mail is r	not delivered to street address)	Room/suite	E	Telephone n	umber		
	Initial	l return	1703 WYANDOTTE STREET		STE 200	0	(816) 47	1-110	0.0	
	Term	ninated C	City or town, state or province, country, a	nd ZIP or foreign postal code	•					
	Amen		KANSAS CITY, MO 64108				Gross receip	ts \$	29,176	5,713.
		cation F N	lame and address of principal officer:	FRANK BYRNE		н	I(a) Is this a grou		or Yes	X No
	_ poa.		1703 WYANDOTTE STREET,	STE 200 KANSAS CITY,	MO 6410	5 н	subordinates I(b) Are all subord		ed? Yes	No
ı	Tax-ex	empt status:) (insert no.) 4947(a)(1)					ee instructions)	
J	Websi	ite: ► WW	W.KCSYMPHONY.ORG				I(c) Group exem	ption numb	oer 🕨	
K	Form	of organization	on: X Corporation Trust	Association Other ►	L Year of		n: 1983 M			e: MO
	art I	Summa								
		Briefly des	scribe the organization's mission or	most significant activities: THE V	ISION OF	THE :	KANSAS C	ITY S	SYMPHONY	IS
ø		-	•	AND COMMUNITIES THROU						
anc			ONIC MUSIC.							
ern	2			scontinued its operations or dispose	ed of more that	–––– n 25% o	f its net assets	 s.		
Governance	3			body (Part VI, line 1a)				3		23.
⋖ŏ	4			he governing body (Part VI, line 1b)				4		17.
Activities	5			ndar year 2013 (Part V, line 2a)				5		287.
Ę	6			sary)				6		500.
Ac	7a	Total unre	elated business revenue from Part VI	II, column (C), line 12				7a		
				Form 990-T, line 34				7b		
							Prior Year		Current	/ear
	8	Contribution	ons and grants (Part VIII, line 1h)			2	6,603,44	1.	18,73	7,241.
nue	9	Program s	service revenue (Part VIII. line 2g)	COP	Y FOR		5,266,31			5, 361.
Revenue	10	Investmen	nt income (Part VIII, column (A), line	es 3. 4. and 7d)	NSPECTION		15,31			2, 950.
œ	11			6d, 8c, 9c, 10c, and 11e)			63,40			4,176
	12			equal Part VIII, column (A), line 12)		3	1,948,48	_		1,376.
	13			ımn (A), lines 1-3)			160,00			0,000
	14			mn (A), line 4)			· · ·	0		
G	15			efits (Part IX, column (A), lines 5-10)			8,888,24	2.	9,52	7,269.
Expenses				(A), line 11e)			126,07			2,513
ç				D), line 25) 1, 172, 014			·			
ш				a-11d, 11f-24e)			4,294,09	8.	5,27	3,286.
				Part IX, column (A), line 25)			3,468,41			3,068
	19			line 12			8,480,06			8,308
or			·			Beginni	ng of Current \	/ear	End of Ye	ar
ets	20	Total asse	ets (Part X, line 16)			3	1,295,93	88.	43,49	3,882.
Net Assets or Fund Balances	21	Total liabil					5,028,97	2.	4,65	6,774
Pur	22			from line 20		2	6,266,96	6.	38,83	7,108.
	rt II	Signat	ture Block		1					
Und	ler pe	nalties of pe	rjury, I declare that I have examined this	s return, including accompanying sched	ules and statem	ents, and	d to the best of	my kno	wledge and b	pelief, it is
true	, corre	ect, and com	plete. Declaration of preparer (other than	officer) is based on all information of wh	ich preparer has	any kno	wledge.			
Sig		Sign	ature of officer				Date			
Hei	e.									
		Туре	e or print name and title							
		Print/Type	preparer's name	Preparer's signature	Date		Check	if PTI	N	
Paid		MICHAE	EL J ENGLE				self-employ	'	00482834	4
	arer	Firm's nam				F	Firm's EIN		60260	
Use	Only		ress > 1201 WALNUT, SUITE 1700	KANSAS CITY MO 64106-2246					221-6300)
May	the I		s this return with the preparer shown						X Yes	No
For	Pape	rwork Red	uction Act Notice, see the separate	e instructions.				[0 (2013)

JSA 3E1065 2.000

KANSAS CITY SYMPHONY 43-1297475 Form 990 (2013) Page 2 Part III **Statement of Program Service Accomplishments** Briefly describe the organization's mission: SEE SCHEDULE O 2 Did the organization undertake any significant program services during the year which were not listed on the 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 \$ 12,536,338. including grants of \$ 200,000.) (Revenue \$ SEE SCHEDULE O 4b (Code:) (Expenses \$ including grants of \$

4d Other program services (Describe in Schedule O.)

) (Revenue \$

(Expenses \$ **4e** Total program service expenses ► 12,536,338.

Form **990** (2013)

including grants of \$

Form 990 (2013) Page 3

1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	'ar	Checklist of Required Schedules			
zonglete Schedule A. 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behald of or in opposition to candidates for public office? If "Mes." complete Schedule C. Part I. 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. 5 Is the organization a section 501(c)(4). 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-137 If "Yes." complete Schedule C. Part II. 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. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part II. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part II. 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part II. 10 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part II. 10 Did the organization services? If "Yes," complete Schedule D. Part II. 11 If the organization services? If "Yes," complete Schedule D. Part II. 12 If If the organization services it on any of the following questions is "Yes," then complete Schedule D. Part II. 13 If If the organization services II "Yes," complete Schedule D. Part IV. 14 Did the organization for port an amount for land, buildings, and equipment in Part X, line 10 If "Yes," complete Schedule D. Par				Yes	No
2 Is the organization required to complete Schedule 6, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Pes" complete Schedule C, Part I. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Pes" complete Schedule C, Part II. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19" ("Pes," complete Schedule C, Part II. 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 II. 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 8 Did the organization maintain collections of works of art, historical treasures, or other similar asses? If "Yes," complete Schedule D, Part III. 9 Did the organization services? If "Yes," complete Schedule D, Part III. 10 Did the organization part an amount for investment of accounts in temporarily restricted endowments, permanent endowments, or quasi-endowments, If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. 12 Did the organization report an amount for investments-o	1			3.7	
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the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7				
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endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Χ
If the organizations answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . 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 . c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . 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 VII . e 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 XI . 11c	10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 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. c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 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 VI. d Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X and XII. e Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization separate or consolidated financial statements for the tax year? If "Yes," and If the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and If the organization asswered "No" to line 12a, then completing Schedule D, Part XI and XII s the organization asswered "No" to line 12a, then completing Schedule D, Part X and XII soptional. 12a Did the organization maintain an office, employees, or agents outside of the United States, or aggregate for eign investments valued at \$10,000 or more? If "Yes," complete Schedule F, Parts II and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnsts or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3 more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 17	11	If the organization answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
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					
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. c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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 VIII. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organizations separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X	а				
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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 VIII. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization 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. 116			11a	Х	
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. d Did the organization report an amount for other assets in Part X, line 15% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization spearate or consolidated financial statements for the tax year include a footnote that addresses the organizations is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 116	b	· ·			
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			11b		Х
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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organizations separate or consolidated financial statements for the tax year include a footnote that addresses the organizations liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	С		44.		37
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organizations separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII			11C		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organizations separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII bid the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII complete Schedule E completing Schedule D, Parts XI and XII is optional complete Schedule E complete Schedul	a		444		V
f Did the organizations 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	_			У	Λ
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X			116	21	
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	•	· · ·	11f		X
b 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	12 a		• • • •		
b 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	. - u		12a		Х
the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	b				
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			12b		Χ
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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	13		13		Χ
fundraising, business, 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	14 a	-	14a		Χ
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV					
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		,	14b		Х
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15		_		
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV			15		X
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16		4.0		77
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	4 -		16		X
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	1 /		17	v	
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		17	Λ	
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	10		12	x	
If "Yes," complete Schedule G, Part III X 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 a	10	·	10	21	
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	. 3		19		Х
	20 a	·			
					•

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Part l	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ
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 Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a	\$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 Schedule K. If "No," go to line 25a	24a		Х
		24b		21
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24-		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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," complete Schedule L, Part L	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Χ
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		Χ
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		Χ
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		
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			
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
30	19? Note . All Form 990 filers are required to complete Schedule O	l	Х	
	15. Reservant of the coordinate are required to complete conclude of the first transfer in the first transfer in the contract of the contract	, ,,,		

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Par				
	Check if Schedule O contains a response or note to any line in this Part V	· · · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		100	110
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	
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 . 287			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	0-		37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		Х
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Χ
b	If %es,+enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Х
h	organization solicit any contributions that were not tax deductible as charitable contributions?	0a		- 71
b	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 services provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		Х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
D 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	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			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	ı Ja		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
h	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

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

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <u>1a</u> 2	3		
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Χ	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
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?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Χ	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			,,
04	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- \	Х
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coa	9. <i>)</i> Yes	Na.
		4.0	res	No X
10a	Did the organization have local chapters, branches, or affiliates?	10a		Λ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	21	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Χ	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	120		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b	Х	
•	rise to conflicts?	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Х	
12		13	X	
13 14	Did the organization have a written whistleblower policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
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?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_KS, MO,			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section			
	available for public inspection. Indicate how you made these available. Check all that apply.	`	, , , ·	,
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the		

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organization: ▶ Barbara tate 1703 wyandotte street, ste 200 kansas city, mo 64105

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

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

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

(A) Name and Title	(B) Average hours per week (list any	box,	not ch unless	s per	ition more rson	e than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1)SHIRLEY_B. HELZBERG	1.00	X		Х				C	0	0
_(2)ROBERT A. KIPP DIRECTOR/VICE PRESIDENT	1.00	Х		Х				C	0	0
_(3)MICHAEL_D. FIELDS DIRECTOR/VICE PRESIDENT	1.00	X		Х				C	0	0
_(4)WILLIAM_M. LYONS DIRECTOR/PRESIDENT	1.00	Х		Х				C	0	0
	1.00	Х		Х				C	0	0
_(6)WILLIAM_B. TAYLOR DIRECTOR/SECRETARY/TREASURER	1.00	Х		Х				C	0	0
	20.00	Х						62,034.	0	15,002.
(8)SOO JEE YANG DIRECTOR	20.00	Х						56,232.	0	13,909.
(9)JOAN HORAN DIRECTOR	1.00	X						C	0	0
(10)PETER S. LEVI DIRECTOR	1.00	Х						C	0	0
(11)PATRICK A. PERSOHN DIRECTOR	1.00	Х						C	0	0
(12)TOM BOWSER DIRECTOR	1.00	Х						C	0	0
(13)RICHARD MILLER DIRECTOR	1.00	Х						C	0	0
(14)TERRY BASSHAM DIRECTOR	1.00	X						C	0	0

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Part VII Section A. Officers, Directors, Ti	rustees, Ke	y En	тріс	yee	es,	and F	ııgı	nest Compensat	ea Employees (d	continuea)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	١,,			ition			Reportable	Reportable	Estimated
	hours per week (list any	,				e than o is both		compensation	compensation from	amount of other
	hours for					or/truste		from the	related organizations	compensation
	related	Ind or o	Ins	Officer	ĕ,	Hig em	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	Individual trustee or director	Institutional trustee	icer	Key employee	hest	mer	(W-2/1099-MISC)	,	organization and related
	line)	tor to	ona		ploy	ee cor				organizations
		uste.	ta:		ée	npei				
		ď	stee			Highest compensated employee				
15) CARY DECAMP	1.00					<u> </u>				
DIRECTOR		Х						0	0	(
16) ANN KAUFMANN BAUM	1.00									
DIRECTOR/VICE PRESIDENT		Х						0	0	(
17) JOHN EDGAR	1.00									
DIRECTOR		Х						0	0	(
18) ELIZABETH SHELLHASE GRAY	20.00									
DIRECTOR		X						51,113.	0	13,128
19) VINCE CLARK	1.00									
DIRECTOR		X						0	0	(
20) MARY LOU TURNER	1.00									
DIRECTOR		Х						0	0	
21) JAMIE MONTGOMERY HELZBERG	1.00									
DIRECTOR		X						0	0	(
22) SARAH ROWLAND	1.00									
DIRECTOR		X						0	0	1
23) KRISTIN VELICER	20.00									
DIRECTOR		X						49,484.	0	23,965
24) BARBARA TATE	40.00									
DIRECTOR BUSINESS OPERATIONS				Х				85,305.	0	27,262
25) FRANK BYRNE	50.00	-						000 -00		10.00
EXECUTIVE DIRECTOR				Χ				222,526.	0	12,622
1b Sub-total								118,266.	0	28,911.
c Total from continuation sheets to Part VII,	-							755,218.	0	135,695.
d Total (add lines 1b and 1c)							<u> </u>	873,484.	0	164,606.
2 Total number of individuals (including but no				d al	bove	e) who	re	ceived more than	\$100,000 of	
reportable compensation from the organization	ווע 🕨		3							1 1
2 Did the experientian list only former office										Yes No

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

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
THAUMUS, INC-FBO M. STERN KANSAS CITY, MO 64111	CONDUCTING SERVICES	378,750.
HARVEST PRODUCTIONS KANSAS CITY, MO 64116	SOUND AND LIGHTING	281,510.
LOS ANGELES PHILHARMONIC LOS ANGELES, CA 90012	FEES FOR SERVICE	137,200.
HARVEST GRAPHICS LENEXA, KS 66215	PRINTING	137,039.
BENNETT DIRECT MILWAUKEE, WI 53202	TELEFUNDING	176,010.

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

Part VII Section A. Officers, Directors, Tro	ustees, Ke	y En	ıplo	yee	es,	and I	lig	hest Compensat	ed Employees (continue		Page (
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles er and	heck ss pe d a d	ition more rson lirect	e than cois both	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	Esti amo o comp	(F) stimated nount of other npensation	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org:	om the anizatio d related anization	d
26) MICHAEL STERN	20.00											
MUSIC DIRECTOR	00.00				Х			80,579.	C)	19,4	129
27) NOAH GELLER CONCERTMASTER	20.00	-				X		150,873.			21,9	352
28) LLEWELLYN CRAING	35.00					Λ		130,673.		'	Z1,3	752
DEVELOPMENT DIRECTOR	1-33.00	1				X		115,338.	C)	17,3	337
	İ							,			,	
												
		-										
1b Sub-total							<u> </u>					
c Total from continuation sheets to Part VII, S	ection A						>					
d Total (add lines 1b and 1c)							<u> </u>					
2 Total number of individuals (including but not reportable compensation from the organizatio			liste 3	d al	oove	e) who	o re	eceived more than	\$100,000 of			
Teportable compensation from the organization			<i></i>								Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the organization and related organizations gr	sum of rep	oortab	ole c	com	pen	satio	n ai	nd other compens	sation from the			
individual									········	4	Х	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on f	fron	n any	un	related organizati		5		Х
Section B. Independent Contractors										<u> </u>		
Complete this table for your five highest componentation from the organization. Report of year.												
year.							1	(B)		(C)		

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form 990 (2013) KANSAS CITY SYMPHONY 43-1297475 Page **9**

Part VIII Statement of Revenue

(B) (C) (D) Related or Unrelated Revenue Total revenue business exempt excluded from tax revenue function under sections 512-514 revenue Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1b С 1,807,302 1d 1e 212,484. Government grants (contributions) . . All other contributions, gifts, grants, and similar amounts not included above . 1f 16,717,455 g Noncash contributions included in lines 1a-1f: \$ _ Total. Add lines 1a-1f 18,737,241 Program Service Revenue **Business Code** TICKET SALES 711190 4,948,190 4,948,190 PERFORMANCE FEES 711190 1,077,171 1,077,171 h С All other program service revenue Total. Add lines 2a-2f 6,025,361 Investment income (including dividends, interest, and other similar amounts)...... 241,611. Income from investment of tax-exempt bond proceeds . . . > 4 1,933. 5 1,933. (ii) Personal (i) Real 6a Gross rents **b** Less: rental expenses . . . Rental income or (loss) . . d Net rental income or (loss) . . (i) Securities (ii) Other Gross amount from sales of 3,493,471. assets other than inventory **b** Less: cost or other basis and sales expenses 1,605,934. 1,887,537. -6,198 c Gain or (loss) 1,881,339. 1,881,339. Other Revenue Gross income from fundraising events (not including \$ ____1,807,302. of contributions reported on line 1c). See Part IV, line 18 a c Net income or (loss) from fundraising events -142,610 -142**,**610. 9a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses 10a Gross sales of inventory, returns and allowances b Less: cost of goods sold b Net income or (loss) from sales of inventory, Miscellaneous Revenue **Business Code** MISCELLANEOUS REVENUE 900099 76,501 76,501 11a b **d** All other revenue Total revenue. See instructions 2,058,774.

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Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	200,000.	200,000.						
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0							
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	776,808.	422,699.	354,109.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0							
7	Other salaries and wages	6,622,880.	5,942,925.	223,175.	456,780.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	416,547.	388,663.	8,670.	19,214.				
۵	· · · · · · · · · · · · · · · · · · ·	1,053,835.	965,047.	24,603.	64,185.				
9 10	Other employee benefits	657,199.	579,906.	37,159.	40,134.				
10 11	Payroll taxes	00.,133.	3.3,300.	3.,103.					
	Management	0							
	Legal	77,819.		77,819.					
		53,080.		53,080.					
	Accounting	0		00,000.					
	I Lobbying Professional fundraising services. See Part IV, line 17.	152,513.			152,513.				
	f Investment management fees	28,339.		28,339.	102/0101				
	Other. (If line 11g amount exceeds 10% of line 25, column								
9		811,721.	740,015.	68,478.	3,228.				
12	(A) amount, list line 11g expenses on Schedule O.)	426,115.	426,079.		36.				
13	Office expenses	884,436.	411,817.	49,345.	423,274.				
14	Information technology	0	,	, , ,					
15	Royalties	0							
16	Occupancy	262,663.		262,663.					
17	Travel	223,057.	161,298.	54,187.	7,572.				
18	Payments of travel or entertainment expenses	,	·	,	·				
	for any federal, state, or local public officials	0							
19	Conferences, conventions, and meetings	0							
20	Interest	5,502.		5,502.					
21	Payments to affiliates	0							
22	Depreciation, depletion, and amortization	140,219.	140,219.						
23	Insurance	74,704.	74,704.						
24	Other expenses. Itemize expenses not covered								
	above (List miscellaneous expenses in line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а	GUESTS ARTISTS AND CONDUCTOR	964,737.	964,737.						
b	CONCERT PRODUCTION EXPENSE	980,634.	980,634.						
c	BAD DEBT EXPENSE	84,682.	84,682.						
d	DUES AND SUBSCRIPTIONS	25,092.	5,817.	17,472.	1,803.				
e	All other expenses	230,486.	47,096.	180,115.	3,275.				
	Total functional expenses. Add lines 1 through 24e	15,153,068.	12,536,338.	1,444,716.	1,172,014.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)								
JSA		<u> </u>			F 000 (0040)				

Form 990 (2013) Page **11**

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X								
		Check if Schedule O contains a response of	note	to any line in this Pa				
					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			1,215,813.	1	1,468,698.	
	2	Savings and temporary cash investments			4,088,010.	2	4,341,853.	
	3	Pledges and grants receivable, net		[16,708,323.	3	22,452,913.	
	4	Accounts receivable, net			445,798.	4	137,944.	
	5	Loans and other receivables from current and	forme	r officers, directors,				
		trustees, key employees, and highest co	omper	sated employees.				
		Complete Part II of Schedule L			0	5	0	
	6	Loans and other receivables from other disqualified pers						
		4958(f)(1)), persons described in section 4958(c)(3)(B) and sponsoring organizations of section 501(c)(9) volu						
		organizations (see instructions). Complete Part II of Sche	dule L	omployees beneficially	0	6	0	
ets	7	Notes and loans receivable, net			0	7	0	
Assets	8	Inventories for sale or use			5,395.	8	5,767.	
•	9	Prepaid expenses and deferred charges			272,442.	9	345,847.	
	10 a	Land, buildings, and equipment: cost or						
		other basis. Complete Part VI of Schedule D	10a	1,380,926.				
	b	Less: accumulated depreciation	10b	783,944.	688,948.	10c	596,982.	
	11				7,871,209.	11	14,143,878.	
	12	Investments - other securities. See Part IV, line 11			0	12	0	
	13	Investments - program-related. See Part IV, line 11	٠		0	13	0	
	14	Intangible assets			0	14	0	
	15	Other assets. See Part IV, line 11			0	15	0	
	16	Total assets. Add lines 1 through 15 (must equal			31,295,938.	16	43,493,882.	
	17	Accounts payable and accrued expenses			1,389,144.	17	1,310,695.	
	18	Grants payable			0	18	0	
	19	Deferred revenue			3,498,378.	19	3,332,619.	
	20	Tax-exempt bond liabilities			0	20	0	
es	21	Escrow or custodial account liability. Complete Pa			0	21	0	
Liabilities	22	Loans and other payables to current and for						
jab		trustees, key employees, highest compen						
_		disqualified persons. Complete Part II of Schedule			107,990.		0	
	23	Secured mortgages and notes payable to unrelate			0	23	0	
	24	Unsecured notes and loans payable to unrelated			0	24	0	
	25	Other liabilities (including federal income tax,						
		parties, and other liabilities not included on lines			22 460		12 460	
		of Schedule D			33,460.	25	13,460.	
	26	Total liabilities. Add lines 17 through 25			5,028,972.	26	4,656,774.	
ses		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	check 34.	there X and				
anc	27	Unrestricted net assets			7,578,919.	27	7,924,480.	
Bal	28	Temporarily restricted net assets			1,985,506.	28	2,267,765.	
p	29	Permanently restricted net assets		<u></u>	16,702,541.	29	28,644,863.	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.	, chec	k here and				
ts (30	Capital stock or trust principal, or current funds				30		
Se	31	Paid-in or capital surplus, or land, building, or equ				31		
Ą	32	Retained earnings, endowment, accumulated incomment				32		
Net	33	Total net assets or fund balances			26,266,966.	33	38,837,108.	
_	34	Total liabilities and net assets/fund balances			31,295,938.	34	43,493,882.	
					· · · · · · · · · · · · · · · · · · ·		Farm 990 (2012)	

Form 990 (2013) Page **12**

	0 (2013)				ıα	ge 12	
Part							
	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		26,8			
2	Total expenses (must equal Part IX, column (A), line 25)	2		15,1			
3							
4	3. 7						
5							
6							
7	Investment expenses	7				0	
8	Prior period adjustments	8		0			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,407,224.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		38,8	37 , 1	L08.	
Part							
	Check if Schedule O contains a response or note to any line in this Part XII		• • •			Ш	
					Yes	No	
1	Accounting method used to prepare the Form 990: CashX Accrual Other						
If the organization changed its method of accounting from a prior year or checked "Other," explain in							
	Schedule O.			2a		Х	
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	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	Χ		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a				
	separate basis, consolidated basis, or both:						
	Separate basis 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 overs	sight					
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	'	2c	Χ		
	If the organization changed either its oversight process or selection process during the tax year, e	xplair	n in				
	Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as see	t forth	n in				
	the Single Audit Act and OMB Circular A-133?			3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits.		3b			

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
►Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Nan	lame of the organization Employer identification number												
KA	NSAS	CITY SYMPHONY	7							43	-129747	75	
Pa	rt I	Reason for Publ	ic Charity Status	s (All organizations mu	ıst con	nplete	this pa	art.) Se	e instr	uctions	i.		
The	orga	inization is not a priv	ate foundation bed	cause it is: (For lines 1 th	rough	11, che	ck only	one bo	x.)				
1		A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(1)(A)(i)				
2	Щ			(1)(A)(ii). (Attach Schedul									
3		A hospital or a coo	perative hospital s	ervice organization descri	ibed in	sectio	n 170(b)(1)(A)	(iii).				
4				erated in conjunction wi	ith a h	ospita	I descr	ibed in	sectio	n 170(k	o)(1)(A)(ii	i). Ente	r the
		hospital's name, cit											
5				nefit of a college or univ	ersity	owned	or ope	erated b	y a go	vernme	ental unit	describe	ed in
		section 170(b)(1)(A		•									
6	Щ		•	or governmental unit des									
7		=	=	es a substantial part of it	s supp	ort fro	m a go	vernme	ental un	it or fro	om the go	eneral p	ublic
_	described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8		-		on 170(b)(1)(A)(vi). (Com									
9	X	-	=	es: (1) more than 331/3%							-	-	-
		· · · · · · · · · · · · · · · · · · ·		exempt functions - subj									
		· · ·		ome and unrelated busing						n 511	tax) from	i busine	sses
40		· · · · · ·		ne 30, 1975. See section						,			
10 11	\vdash	-		ted exclusively to test for	-	-					or to o	orn/ out	tho
• •		_	-	rated exclusively for the apported organizations de			-					-	
				es the type of supporting					-			000 30	CLIOII
		a Type I		c Type III-Function	-						unctionally	v integra	ted
•				e organization is not con	-	-					-	_	
		-	-	other than one or more			-	-	-		-	-	
		or section 509(a)(2	-	•	•	, ,,		J				`	, ,
f		If the organization	received a writte	n determination from the	e IRS	that it	is a T	ype I, T	ype II,	or Typ	e III supp	orting	
		organization, check											
Ç	J	Since August 17, 2	006, has the orga	nization accepted any gift	t or co	ntributi	on from	n any of	the				
		following persons?									•		
		(i) A person who	directly or indirec	tly controls, either alone	or toge	ether v	vith per	rsons de	escribe	d in (ii)	and	Yes	No
				the supported organization	on?						11	g(i)	
				scribed in (i) above?							11	g(ii)	
		(iii) A 35% controll	ed entity of a pers	on described in (i) or (ii) a	bove?						119	g(iii)	
t	1	Provide the following	ng information abo	ut the supported organiza	ation(s)).	1				1		
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv)	Is the zation in		ou notify anization		s the zation in	(vii) Amou		etary
		organization		above or IRC section	col. (i)	listed in overning	in col. (i) of your	col. (i) o	rganized		upport	
				(see instructions))	docu	ment?	· · · ·	oort?		U.S.?	-		
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)													
(D)													
(E)													
Tot	al												

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

Schedule A (Form 990 or 990-EZ) 2013 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (c) 2011 (d) 2012 Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (e) 2013 (f) Total grants, contributions, membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3..... The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)..... Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar Net income from unrelated business activities, whether or not the business 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 **Total support.** Add lines 7 through 10... First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) % % 16a 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check b 331/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances+ test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013

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

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

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	9,060,911.	10,226,483.	7,714,060.	26,603,441.	18,737,241.	72,342,136.
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	2,919,603.	3,378,809.	4,956,789.	5,266,317.	6,025,361.	22,546,879.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						C
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						C
6	Total. Add lines 1 through 5	11,980,514.	13,605,292.	12,670,849.	31,869,758.	24,762,602.	94,889,015.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	2,243,259.	3,008,206.	2,622,409.	19,681,181.	10,443,008.	37,998,063.
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
С	Add lines 7a and 7b	2,243,259.	3,008,206.	2,622,409.	19,681,181.	10,443,008.	37,998,063.
8	Public support (Subtract line 7c from						
	line 6.)						56,890,952.
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	11,980,514.	13,605,292.	12,670,849.	31,869,758.	24,762,602.	94,889,015.
10 a	Gross income from interest, dividends,	, ,		, ,		, ,	, ,
	payments received on securities loans, rents, royalties and income from similar						
	sources	7,298.	8,936.	3,077.	4,971.	243,544.	267,826.
b	Unrelated business taxable income (less	,	,		·	·	,
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	7,298.	8,936.	3,077.	4,971.	243,544.	267,826.
11	Net income from unrelated business	.,=	2,2231	0,000	-,		
	activities not included in line 10b,						
	whether or not the business is regularly carried on						C
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part IV.) ATCH 1	108,445.	166,781.	25,064.	83,660.	76,501.	460,451.
13	Total support. (Add lines 9, 10c, 11,	100,110.	100,701.	20,001.	23,000.	. 0, 301.	100, 101.
-	and 12.)	12,096,257.	13,781,009.	12,698,990.	31,958,389.	25,082,647.	95,617,292.
14	First five years. If the Form 990 is for						
-	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2013 (line 8			nn (f))		15	59.50%
16	Public support percentage from 2012 Sche					16	67.05%
	tion D. Computation of Investmen						
<u> 17</u>	Investment income percentage for 2013 (lin			3. column (f))		17	.28%
18	Investment income percentage from 2012					18	.05%
	331/3% support tests - 2013. If the org			on line 14 and			
. J a	17 is not more than 331/3%, check th	-					. \square
h	331/3% support tests - 2012. If the orga		-	•			
D	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization						. —

JSA 3E1221 1.000

Page 4

Schedule A (Form 990 or 990-EZ) 2013

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

ATTACHMENT	1	
	Τζ	JATC
2013	Τ,	~ 1111

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2009	2010	2011	2012	2013	TOTAL
MISCELLANEOUS	108,445.	166,781.	25,064.	83,660.	76,501.	460,451.
TOTALS	108,445.	166,781.	25,064.	83,660.	76,501.	460,451.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its See separate instructions.

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

•	Section 501(c)(4), (5), or (6) organization	anizations: Complete Part III.			
Name	e of organization			Employer identi	fication number
KAN	SAS CITY SYMPHONY			43-12	97475
Par	t I-A Complete if the c	organization is exempt under	section 501(c) or i	is a section 527 orga	nization.
1	Provide a description of the	organization's direct and indirect p	oolitical campaign ac	tivities in Part IV.	
2	Political expenditures			▶\$	
3	Volunteer hours				
		organization is exempt under s			
1		cise tax incurred by the organization			
2		cise tax incurred by organization ma			
3		a section 4955 tax, did it file Form			
	If "Yes." describe in Part IV.				Yes No
		organization is exempt under	section 501(c) av	reant section 501(c)(3	1
	-	<u> </u>			<u> </u>
1		expended by the filing organization			
2		ng organization's funds contributed			
2		es			
3		enditures. Add lines 1 and 2. En			
	•			-	
4		e Form 1120-POL for this year?			
5		and employer identification numb			
		s. For each organization listed, en			
		tributions received that were prom nd or a political action committee (F			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(0) = 111	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
(1)					
(2)					
(2)		<u> </u>			
(3)					
(0)					
(4)					
` ,					
(5)					
(6)					

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

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).									
A	Check ▶				an affiliated grou I share of excess lo		rt IV each affiliated g itures).	roup member's		
В	B Check ▶ if the filing organization checked box A and "limited control" provisions apply.									
				ying Expen			(a) Filing	(b) Affiliated		
		(The term "expendit	ures" m	eans amour	nts paid or incurred.)	organization's totals	group totals		
1 a	Total I	obbying expenditures to	influenc	ce public op	inion (grass roots lo	bbying)				
k	b Total lobbying expenditures to inf			ce a legislati	ive body (direct lobb	ying)				
c	: Total l	obbying expenditures (a	add lines	1a and 1b)						
c		exempt purpose expend								
6	• Total e	exempt purpose expend	litures (a	dd lines 1c	and 1d)					
f		ing nontaxable amount								
	columi				J					
	If the am	ount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amount i	is:				
	Not over		, , ,		amount on line 1e.					
	-	0,000 but not over \$1,000	0.000	+	us 15% of the excess	over \$500,000.				
		000,000 but not over \$1,50	,	 	us 10% of the excess					
		500,000 but not over \$17,0		· ·	us 5% of the excess o					
	Over \$17		000,000	\$1,000,000		τοι φτησσομοσοι				
		roots nontaxable amour	nt (enter							
i I		ect line 1g from line 1a.	-		•	_				
i		act line 1f from line 1c. I								
i		e is an amount other					ation file Form 4720			
,		ing section 4911 tax for			•	•		Yes No		
_	ТОРОТ	ing decitor for reactor						100 110		
					aging Period Under	` '				
		·			ection 501(h) election instructions for lin		complete all of the fivon page 4.)	/e		
			Lobk	ying Exper	nditures During 4-Ye	ear Averaging Per	iod			
		ar year (or fiscal year peginning in)	(a)	2010	(b) 2011	(c) 2012	(d) 2013	(e) Total		
28	Lobbyin	g nontaxable amount								
_ k		g ceiling amount of line 2a, column (e))								
_	: Total lob	obying expenditures								
_	I Grassro	ots nontaxable amount								
•		ots ceiling amount of line 2d, column (e))								
f	Grassro	ots lobbying expenditures								

chedule C (Form 990 or 990-EZ) 2013 Page **3**

(election under section 501(h)).) i tile	d Fori	n 576	8		
For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(8	a)		(b)		
description of the lobbying activity.	Yes	No		Amou	ınt	
1 During the year, did the filing organization attempt to influence foreign, national, state or local						
legislation, including any attempt to influence public opinion on a legislative matter or						
referendum, through the use of:						
a Volunteers?		X				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х				
c Media advertisements?d Mailings to members, legislators, or the public?		Х				
d Mailings to members, legislators, or the public?		Х				
Publications, or published or broadcast statements? Constitute of the approximations for lab being purposed?		X				
f Grants to other organizations for lobbying purposes?g Direct contact with legislators, their staffs, government officials, or a legislative body?		X				
 b In Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 		X				
· Other and date of	X	- 1			5	,000
j Total. Add lines 1c through 1i						,000
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			<u> </u>	, 000
b If "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50		, or s	ectio	<u> </u>		
501(c)(6).		-				
					Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				1		
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? 				2		
					2 :0	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."					3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members	OR (b) Pai	t III-A		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR (b) Pai	t III-A		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid).	OR (b) Pai	t III-A		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	unts	b) Pai	t III-A		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid).	unts	b) Pai	1 2a		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	unts	b) Pai	1 1 2a 2b		3, is	
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible	unts of the	b) Par	1 1 2a 2b 2c		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year?	unts of the lobbying of the lo	b) Pai	1 2a 2b 2c 3		3, is	
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information	unts of the obbying o	b) Pai	1 1 2a 2b 2c 3 4 5	, line		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dual of the section 162(e) dual of t	unts of the obbying o	b) Pai	1 1 2a 2b 2c 3 4 5	, line		
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) do 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated Part II-B, line 1. Also, complete this part for any additional information.	unts of the lobbying group	b) Pai	2a 2b 2c 3 4 5	A, line	; and	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated Part II-B, line 1. Also, complete this part for any additional information.	unts of the lobbying group	b) Pai	2a 2b 2c 3 4 5	A, line	; and	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dual of the section of the section 162 (e) dual of the section of the s	unts of the lobbying group	b) Pai	2a 2b 2c 3 4 5	A, line	; and	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) do 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated Part II-B, line 1. Also, complete this part for any additional information.	unts of the lobbying group	b) Pai	2a 2b 2c 3 4 5	A, line	; and	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dual of the section section of the sectio	unts of the obbying group	b) Pai	2a 2b 2c 3 4 5	A, line	; and	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated Part II-B, line 1. Also, complete this part for any additional information. SCHEDULE C, PART II-B, LINE 1I OTHER ACTIVITIES ALONG WITH A CONSORTIUM OF ARTS ORGANIZATIONS WE PAID A LOBBYIST TO	unts of the company o	b) Pai	2a 2b 2c 3 4 5	A, line	; and	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated Part II-B, line 1. Also, complete this part for any additional information. SCHEDULE C, PART II-B, LINE 1I OTHER ACTIVITIES	unts of the company o	b) Pai	2a 2b 2c 3 4 5	A, line	; and	

ORGANIZATIONS.

Schedule C (Form 990 or 990-EZ) 2013

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

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

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

727 37	ICAR CATELY COMPLICATE	42 120747F
	ISAS CITY SYMPHONY	43-1297475
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or A Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	ccounts.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	
Par		n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	f an historically important land area
	Protection of natural habitat Preservation of	f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminal	ated by the organization during the
	tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har	ndling of
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease	ements during the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easemen	its during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial	al statements that describes the
	organization's accounting for conservation easements.	
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its r works of art, historical treasures, or other similar assets held for public exhibition, educ	evenue statement and balance sheet
	public service, provide, in Part XIII, the text of the footnote to its financial statements that described in the service in Part XIII, the text of the footnote to its financial statements that described in the service in Part XIII, the text of the footnote to its financial statements that described in the service in th	cribes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	
	works of art, historical treasures, or other similar assets held for public exhibition, educ public service, provide the following amounts relating to these items:	cation, or research in furtherance of
	(i) Revenues included in Form 990, Part VIII, line 1	· · · · · · · ▶ \$
	(ii) Assets included in Form 990, Part X	· · · · · · · · ▶ \$
2	If the organization received or held works of art, historical treasures, or other similar a	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1	►\$
b	Assets included in Form 990, Part X	▶ \$

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

Page 2

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

Par	t III Orga	nizations Maintainii	ng Collections o	f Art,	Historic	cal Tr	reasur	es,	or Oth	ner Similar	Asse	ts (con	tinue	ed)
3		organization's acquisitic ems (check all that app		other	records,	check	any c	of the	follow	ring that are	a sign	ificant u	ise o	of its
а	Publi	c exhibition		d		oan o	r exch	ange	prograi	ms				
b	Scho	larly research		е		Other		-	-					
С		ervation for future gene	rations			-								
4	•	lescription of the organ		s and	explain I	how th	hev fui	ther	the or	ganization's	exempt	purpos	e in	Part
	XIII.	1 0			•		,		•	_	•			
5	During the	year, did the organization	on solicit or receive	donatio	ons of ar	t. histo	rical tr	easu	res. or	other similar				
		sold to raise funds rath									Г	Yes		No
Par		ow and Custodial Ar											V. Iir	
		ported an amount or	•	•		g		u				, . a	.,	,
				, -										
1a	Is the organ	nization an agent, truste	e. custodian or othe	er interi	mediary	for co	ntributi	ons (or other	assets not				
		Form 990, Part X?									Г	Yes	X	No
b	If "Yes." ex	plain the arrangement in	Part XIII and comp	olete th	e followir	na tabl	le:							,
-						.9				Am	ount			
c	Beginning h	alance						10		7 (111)				
d		uring the year												
<u>~</u>		s during the year												
f		ince												
2a	-	anization include an am										Yes	Х	No
	_	plain the arrangement in								in Part XIII			71	INO
		owment Funds. Com						_				· · · ·		
Гаі	L V LIIU	owinent i unus. Com	(a) Current year	1	b) Prior yea				rs back	(d) Three year		(e) Four	vears	hack
1a	Reginning o	of year balance	7,871,210.		, 683, 2				,240.	3,292,				$\frac{540}{540}$
h		ns	6,642,696.		,053,0		٦,		,205.	1,020,				464
		nent earnings, gains,	0,042,090.		,000,0	740.		70	, 200.	1,020,	000.	-	194,	
C			1,634,169.		689,2	224		۵	,124.	630	925.		727	979.
٨		cholarships	1,034,109.		009,2	234.		9	, 124.	030,	923.	•)) / ,	
u		nditures for facilities												
е		ns	1 002 706		E40 0	177		171	005	1 5 5	E 2 C		1 4 0	E 1 7
£		ive expenses	1,983,786.		540,9	_			905.		536.	-		517.
		•	20,412.		13,4		4		377.		351.	2 /		264
g	-	balance	14,143,877.		,871,2				,287.	4,788,	240.	3,4	<u> </u>	202.
2		estimated percentage			lance (lin	ne 1g,	columr	ı (a))	held as	:				
a		gnated or quasi-endown		0 %										
		endowment ► 73.7												
С		restricted endowment												
•		tages in lines 2a, 2b, ar			!				دا حادداد	.:	_			
3a		ndowment funds not in	the possession of	the org	anization	ımata	are nei	u an	u aumir	iisterea for tri	е	Г		
	organizatio	-											Yes	No
		d organizations										3a(i)	Х	
		organizations										3a(ii)		X
_		Ba(ii), are the related org	=	-								3b		
4		Part XIII the intended u		tion's e	endowme	ent fun	ds.							
Par	t VI Land	l, Buildings, and Equ plete if the organiza	ipment. Ition answered "Y	es" to	Form 90	an Pa	art I\/	ine '	11a S	e Form 99	∩ Part	X line	10	
		escription of property	(a) Cost of				r other ba	_		cumulated		l) Book val		
			(inve	stment)	(2)		her)			eciation		,		
1a	Land													
b	J													
С	Leasehold i	improvements				2	96,32	L4.	1	12,616.		18	33,6	<u> </u>
d	Equipment					1,0	84,61	L3.	6	71,329.		4.1	13,2	284.
е	Other													
Tota	I. Add lines 1	la through 1e. (Column	(d) must equal For	m 990	Part X. c	olumn	(B) lin	e 10	(c).)			5.0	96,9	82.

Page 3 Schedule D (Form 990) 2013

Part VII	Investments - Other Securities. Complete if the organization answered	l "Yes" to Form 990,	Part IV, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financia	al derivatives		
	held equity interests		
/ / \ \			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII			
	Complete if the organization answered	l "Yes" to Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets. Complete if the organization answered	l "Yes" to Form 990,	Part IV, line 11d. See Form 990, Part X, line 15.
	(a)	Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B) l	ine 15.)	▶
Part X	Other Liabilities. Complete if the organization answered line 25.	l "Yes" to Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	e
	al income taxes		
	JLTING OBLIGATION	13,	460.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 13,4	460
		<u> </u>	
-	or uncertain tax positions. In Part XIII, provide the		e organization's financial statements that reports the

PAGE 71

Schedule D (Form 990) 2013 Page **4**

Part 1	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	-	
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.) Add lines 22 through 2d		
e	Add lines Za tillough Zu	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Port VIII.)		
	Other (Describe in Part XIII.) Add lines 4a and 4b	4c	
C	Add lifted to drid to		
5			
5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part		5	ine 4; Part X, line
Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line</i> 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
Part Provid 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	

JSA 3E1271 1.000 Schedule D (Form 990) 2013

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

TOTAL EARNED REVENUE, INCLUDING FEES FOR PIT SERVICES PROVIDED TO THE LYRIC OPERA OF KANSAS CITY AND THE KANSAS CITY BALLET ARE 37% OF OUR OPERATING REVENUE. OUR ANNUAL FUND RAISES 53% OF OUR BUDGET. ENDOWMENT FUNDS COVER THE REMAINING 10% OF THE SYMPHONY'S OPERATING BUDGET WHICH ALLOWS THE SYMPHONY TO HIRE AND RETAIN SKILLED PROFESSIONAL MUSICIANS.

KANSAS CITY SYMPHONY

SCHEDULE D, PART X, LINE 2

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE G

Part I

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

KANSAS CITY SYMPHONY

43-1297475

Inspection Employer identification number

1 BENNETT DIREC 2	·T			outions?	from activity	fundraiser listed in col. (i)	(or retained by) organization
BENNETT DIREC	·T	1	Yes	No			
2	· -	TELE- FUNDRAISING		X	336 , 919.	152 , 513.	184,406
3							
4							
5							
6							
7							
8							
9							
10							
Total		-			336,919.	152 , 513.	184,406
registration o	r licensing.						
KS,MO,							

43-1297475

Schedule G (Form 990 or 990-EZ) 2013

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

		gross receipts greater than \$5,0	I				
			(a) Event #1 JEWEL BALL	(b) Event #2 SYMPHONY BALL	(c) Other events	(d) Total events (add col. (a) through	
4)			(event type)	(event type)	(total number)	col. (c))	
Revenue	1	Gross receipts	902,941.	1,243,223.	261,734.	2,407,898	
22	2	Less: Contributions	705,335.	968,595.	133,372.	1,807,302	
		Gross income (line 1 minus line 2)		274,628.	128,362.	600,596	
	4	Cash prizes					
	5	Noncash prizes					
Expenses	6	Rent/facility costs	24,578.	5,000.	11,431.	41,009	
t Expe	7	Food and beverages	161,107.	81,525.	14,798.	257,430	
Direct	8	Entertainment	73,142.	8,500.	400.	82,042	
	9	Other direct expenses	196,792.	87,263.	78,670.	362 , 725	
	11	Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E	0 from line 3, column (danization answered "Y)	<u></u>	743,206 -142,610 rted more	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Re	1	Gross revenue					
Direct Expenses	2	Cash prizes					
	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor	Yes% No	Yes% No	Yes% No		
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)			
	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)			
9	F	nter the state(s) in which the organizat	tion operates gaming ac	tivities:			
a	l Is	the organization licensed to operate of "No," explain:				. Yes No	
	_	· -					
10 a	ı W	ere any of the organization's gaming	licenses revoked, suspe	ended or terminated durin	ng the tax year?	. Yes No	

Schedule G (Form 990 or 990-EZ) 2013

b If "Yes," explain:

KANSAS CITY SYMPHONY

Sched	dule G (Form 990 or 990-EZ) 2013	Page 3
11	Does the organization operate gaming activities with nonmembers? Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	
	formed to administer charitable gaming?	No
13	Indicate the percentage of gaming activity operated in:	
а	The organization's facility	%
b	An outside facility	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name ▶	
	Address ▶	
15 a	Does the organization have a contract with a third party from whom the organization receives gaming	
	revenue?Yes	No
b		
	amount of gaming revenue retained by the third party ▶ \$	
С	If "Yes," enter name and address of the third party:	
	Name ▶	
	Address ▶	
16	Gaming manager information:	
	Name ▶	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	Director/officer Employee Independent contractor	
17	Mandatory distributions:	
а		
	retain the state gaming license?	No
b		
	or spent in the organization's own exempt activities during the tax year ▶ \$	
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	

SCHEDULEI (Form 990)

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No. 1545-0047 2013

▶ Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service	► Information about Sc	Aur hedule I (Form	Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	uctions is at www	irs.aov/form990.		Inspection
						Employer identification number	on number
KANSAS CITY SYMPHONY						43-1297475	
Part General Information on Grants and Assistance	ants and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	rds to substantiate the	amount of the	grants or assistan	ce, the grantees'	eligibility for the grants		
the selection criteria used to award the grants or assistance?	the grants or assistance	toring the use o	forant funds in the	United States			⊠ Yes No
Ø	ice to Governments	and Organiza nore than \$5,0	tions in the Unit	ed States. Come aduplicated if ac	is and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, more than \$5,000. Part II can be duplicated if additional space is needed.	ation answered "Y eeded.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE NELSON ATKINS MUSEUM OF ART 4525 OAK STREET KANSAS CITY, MO 64111	 1 44-0558499	501(C)(3)	200,000.				SUPPORT OPERATIONS
(5)							
(9)							
(6)							
(1 <u>0</u>)							
(11)							
(1 <u>2</u>)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table		rganizations list	organizations listed in the line 1 table				

3 Enter total number of other organizations are the Instructions for Form 990.

V 13-7.15

8:41:36 AM

Schedule I (Form 990) (2013)

43-1297475

Page 2

Schedule I (Form 990) (2013)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
_						
٥.						
_						
_						
,						
art IV	art IV Supplemental Information. Complete this part	is part to prov	vide the informat	tion required in	Part I, line 2, Part III,	to provide the information required in Part I, line 2, Part III, column (b), and any other additional

information

SCHEDULE I, PART I, LINE 2

ONE VOLUNTEER ORGANIZATION, THE JEWELL BALL, WHICH IS ORGANIZED UNDER THE

SYMPHONY'S AUSPICES, RAISES FUNDS FOR BOTH THE KANSAS CITY SYMPHONY AND

THE NELSON ATKINS MUSEUM OF ART. GROSS REVENUE AND EXPENSES ARE RUN

THROUGH THE SYMPHONY'S BOOKS AND NET PROCEEDS ARE SPLIT BETWEEN THE TWO

ORGANIZATIONS EQUALLY.

Schedule I (Form 990) (2013)

78

PAGE

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

43-1297475

Department of the Treasury Internal Revenue Service Name of the organization

KANSAS CITY SYMPHONY

Employer identification number

Part	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 in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	Proportionary Sportating account 1 Grownia Services (e.g., maia, original)			
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	46	Х	
•	explain	1b	Λ	
2	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 in line			
	1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The to any of lines at s, not the persons and provide the applicable amounts for each form in rate in.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3	compensation contingent on the revenues of:			
_		F		v
a	The organization?	5a		X
b	Any related organization?	5b		A
•	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2013

43-1297475

Schedule J (Form 990) 2013

Page 2

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

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

Note. The sum of columns (B)(i)-(iii) 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/	of W-2 and/or 1099-MISC	or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable		(F) Compensation
(A) Name and Trtle	l	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
FRANK BYRNE	ε	203,136.	15,000.	4,390.	6,230.	6,392.	235,148.	
1 EXECUTIVE DIRECTOR	€	0	0					
NOAH GELLER	ε	150,825.	0	148	10,616.	11,336.	172,825.	
2 CONCERTMASTER	Œ)	0	0	0				
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16	(ii)							
							Sch	Schedule J (Form 990) 2013

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43-1297475

Schedule J (Form 990) 2013

Part | Supplemental Information

Complete this part to 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.

SCHEDULE J, PART II & FORM 990, PART VII, SECTION A

MR. BYRNE RECIEVED A GROSSED UP MR. STERN RECEIVED A HOUSING ALLOWANCE. THESE AMOUNTS WERE INCLUDED IN THE INDIVIDUALS' 1099 OR W-2 AS PAYMENT.

TAXABLE COMPENSATION.

Schedule J (Form 990) 2013

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open To Public

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

KANSAS CITY SYMPHON	Y							43	-129	7475)			
Part I Excess Benefit Complete if the o									Z, Pa	ırt V, li	ine 40	b.		_
1 (a) Name of disqualified	d nerson	(b) Relatio			n disqualified	person	(c) Desc	rintion (of tran	saction	1	(d)	Correct	eď
	2 por 5011		an	d orgar	nization		(6) 5000	- Inplication		Juotioi	•	Y	es N	O
(1)												_		_
(2)												_		_
(4)														-
(5)												_		-
(6)														-
2 Enter the amount of to under section 4958.3 Enter the amount of to										* \$_ • \$_				_
Part II Loans to and/	or From Inte	rested Pers	sons es" or	n Form	990-EZ, Pa	rt V, li	ne 38a or Form 99				or if th	ne		_
(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fror	an to or n the ization?	(e) Origin principal am		(f) Balance due	(g) In	default?		ard or	(i) W agree		
			То	From				Yes	No	Yes	No	Yes	No	_
(1)														_
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														_
(10)														_
Part III Grants or Ass Complete if the (a) Name of interested person	istance Ben	efiting Inter	este	d Pers	sons. 990, Part IV	, line 2	7. I) Type of assistance		(a)	Purnos	e of as	sistan	Ce	_
		the organization		-,ou	5. 2555241100		., . , , , , , , , , , , , , , , , , ,		(e) Purpose of assistance					
(1)								-						_
(2)														_
(3)								-						_
(4)														_
(5)								+						_
(6)								+						_
(7)								-+						-
(8)														-
(10)								+						-

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

Schedule L (Form 990 or 990-EZ) 2013

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SEE SCHEDULE L, PART V					
_(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV

- (A) SOBEL PROPERTIES, LLC
- (B) SHIRLEY HELZBERG IS A MANAGING MEMBER OF SOBEL PROPERTIES, LLC

 AND A DIRECTOR OF THE KANSAS CITY SYMPHONY. SHE HAS A FAMILY

 MEMBER WHO IS ALSO A DIRECTOR.
- (C) \$257,665
- (D) THE KANSAS CITY SYMPHONY LEASES OFFICE SPACE FROM SOBEL PROPERTIES, LLC.
- (E) NO
- (A) THAUMUS, INC.
- (B) MICHAEL STERN IS THE OWNER OF THAUMUS, INC. AND IS THE MUSIC DIRECTOR FOR KANSAS CITY SYMPHONY.
- (C) \$343,750
- (D) THAUMUS, INC. PROVIDES CONDUCTING SERVICES FOR KANSAS CITY SYMPHONY.
- (E) NO

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

KANSAS	CITY	SYMPHONY		43-1297475	
Part I	Types	s of Property			
					6

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash conf			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	X	4.	E40 700	SELLING E	D T C I	7	
9	Securities - Publicly traded		4.	549,782.	SELLING E	RICE	7	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
40	or trust interests							
12 13	Qualified conservation							
13	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		3.	3,272.	FMV			
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►(JEWELRY)	X	1.	65,000.	FMV			
26	Other ►(_FLOWERS)	X	1.	8,800.	FMV			
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received							
	which the organization completed I	Form 8283,	Part IV, Donee Acknowledg	ement	29			
20 -	During the year did the argenizat		hu contribution one propo	which appeared in Don't Libra	a 1 20 that		Yes	No
30 a	During the year, did the organizat it must hold for at least three yea			•				
						20-		37
h	used for exempt purposes for the e		penoa?			30a		X
31	If "Yes," describe the arrangement in Does the organization have a		cance policy that require	s the review of any r	on standard			
31						31	Х	
32 a	contributions? Does the organization hire or use	third narti	es or related organization	e to solicit process or s	edl noncash	31	Λ	
32 a		•	<u> </u>	· ·		32a		Х
b	contributions?					JZa		
33	If the organization did not report ar	amount in	column (c) for a type of pro	perty for which column (a) is checked			
	describe in Part II.	. amount in	23.2 (o, 10. a typo of pro	polity for minori obtainin (a)	, .5 011001100,			

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

Schedule M (Form 990) (2013)

KANSAS CITY SYMPHONY 43-1297475

Schedule M (Form 990) (2013) Page **2**

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

SCHEDULE M, PART I, COLUMN B

THE AMOUNTS IN THIS COLUMN REPRESENTS THE NUMBER OF CONTRIBUTIONS DURING THE YEAR.

Schedule M (Form 990) (2013)

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2013

Open to Public Inspection

43-1297475

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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KANSAS CITY SYMPHONY

FORM 990, PART III, LINE 1

ITS MISSION IS TO PERFORM GREAT PERFORMANCES FOR GREATER AUDIENCES.

THE KANSAS CITY SYMPHONY WILL ACHIEVE THIS MISSION BY:

- DEVELOPING AN UNCOMPROMISING PERFORMANCE STANDARD.
- ADVANCING THE PROFILE AND VALUE OF THE ORCHESTRA LOCALLY, NATIONALLY AND INTERNATIONALLY.
- DEVELOPING THE FINANCIAL RESOURCES TO ALLOW THE ORCHESTRA TO THRIVE TODAY AND TOMORROW.
- CREATING AN INTERNAL CULTURE THAT STIMULATES EFFECTIVE RELATIONSHIPS WITHIN AND BETWEEN BOARD, STAFF AND MUSICIANS.
- DEVELOPING AUDIENCES AND PARTNERSHIPS THAT ALLOW THE ORCHESTRA TO THRIVE TODAY AND TOMORROW.

FORM 990, PART III, LINE 4A

THE SYMPHONY PERFORMED 59 5CLASSICAL, POPS, CHAMBER ORCHESTRA, AND FAMILY CONCERTS FOR MORE THAN 86,000 PEOPLE IN HELZBERG HALL WITHIN THE KAUFFMAN CENTER FOR THE PERFORMING ARTS. AN ADDITIONAL 126 PERFORMANCES TOOK PLACE THAT INCLUDED THE FOLLOWING:

- 25 PERFORMANCES FOR MORE THAN 29,000 SCHOOL AGED CHILDREN K-12.
- 61 PERFORMANCES IN SUPPORT OF THE PROGRAMS OF LYRIC OPERA OF KANSAS
 CITY AND THE KANSAS CITY BALLET.
- 3 PERFORMANCES IN SUPPORT OF SYMPHONY IN THE FLINT HILLS, THE

Name of the organization Employer identification number
KANSAS CITY SYMPHONY 43-1297475

MISSION PROJECT AND KANSAS CITY YOUNG AUDIENCES, OTHER NONPROFIT ORGANIZATIONS IN THE REGION.

- 9 PERFORMANCES OF THE MESSIAH AND CHRISTMAS FESTIVAL, A POPS BASED HOLIDAY PROGRAM.
- 2 FREE PERFORMANCES ON LABOR DAY AND MEMORIAL DAY WEEKENDS WHICH WERE ATTENDED BY OVER 50,000 PEOPLE
- 3 ORGAN RECITALS
- 6 FREE HAPPY HOUR CHAMBER MUSIC CONCERTS.

FORM 990, PART IV, LINE 12 & PART XII, LINE 2B THE KANSAS CITY SYMPHONY HAD A FINANCIAL AUDIT IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING STANDARDS (GAAS). HOWEVER, THE AUDITED FINANCIAL STATEMENTS ISSUED RECEIVED A QUALIFIED OPINION, BECAUSE THEY DO NOT COMPLY WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES (GAAP). THIS QUALIFICATION IS A RESULT OF THE EXCLUSION OF ITS BENEFICIAL INTEREST IN NET ASSETS HELD BY A THIRD PARTY FOUNDATION. THE MARKET VALUE OF INVESTMENTS AND THE RELATED INCOME OF THE THIRD-PARTY FOUNDATION ARE INCLUDED IN THE NOTES TO THE FINANCIAL STATEMENTS. EXCEPT FOR THE EFFECTS ON THE FINANCIAL STATEMENTS OF THE OMISSION OF THE KANSAS CITY SYMPHONY'S BENEFICIAL INTEREST IN NET ASSETS HELD BY A THIRD-PARTY FOUNDATION AS DESCRIBED IN THE PRECEDING PARAGRAPH, THE FINANCIAL STATEMENTS REFERRED TO ABOVE PRESENT FAIRLY, IN ALL MATERIAL RESPECTS, THE FINANCIAL POSITION OF THE KANSAS CITY SYMPHONY AS OF JUNE 30, 2014 AND 2013, AND THE CHANGES IN NET ASSETS AND ITS CASH FLOWS FOR THE YEARS THEN ENDED IN CONFORMITY WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA.

Name of the organization

KANSAS CITY SYMPHONY

Employer identification number

43-1297475

FORM 990, PART VI, SECTION A, LINE 2
SHIRLEY HELZBERG AND JAIME MONTGOMERY HELZBERG HAVE A FAMILY
RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 8B

THE RETIREMENT COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE

GOVERNING BODY ON MATTERS THAT RELATE TO THE 403(B) RETIREMENT PLAN. THE

MINUTES OF THE RETIREMENT COMMITTEE ARE DOCUMENTED.

THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE
GOVERNING BODY BUT IT DOES NOT HAVE PRACTICES OR POLICIES REGARDING
DOCUMENTATION OF MEETINGS OR WRITTEN ACTION OF ITS COMMITTEE. AN AGENDA
AND WRITTEN REPORT ABOUT ISSUES WHICH ARE TO BE DISCUSSED AT EACH MEETING
ARE PROVIDED BY THE EXECUTIVE DIRECTOR PRIOR TO THE MEETING.

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

THE ORGANIZATION'S FINANCE DIRECTOR AND ACCOUNTING MANAGER GATHER THE

INFORMATION WHICH IS SENT TO AN INDEPENDENT ACCOUNTING FIRM FOR

PREPARATION AND REVIEW OF THE RETURN. THE RETURN IS THEN REVIEWED BY THE

FINANCE DIRECTOR, THE EXECUTIVE DIRECTOR AND THE BOARD TREASURER. ANY

QUESTIONS OR CONCERNS OF THESE REVIEWERS ARE ADDRESSED WITH THE

INDEPENDENT ACCOUNTING FIRM. ANY CHANGES OR CLARIFICATIONS THAT NEED TO

BE INCORPORATED INTO THE RETURN ARE MADE. ONCE THESE CHANGES ARE

INCORPORATED, THE 990 IS THEN REVIEWED BY THE FINANCE COMMITTEE AND ANY

CHANGES OR CLARIFICATIONS REQUIRED SUBSEQUENT TO THAT REVIEW ARE

INCORPORATED INTO THE RETURN. THEN THE RETURN IS EMAILED TO THE ENTIRE

Name of the organization

KANSAS CITY SYMPHONY

43-1297475

VOTING BOARD WITH INSTRUCTION TO CONTACT THE BOARD TREASURER WITH ANY CONCERNS OR QUESTIONS THEY MAY HAVE. ANY CHANGES OR CLARIFICATIONS THAT NEED TO BE INCORPORATED IN THE RETURN ARE MADE AND THEN THE RETURN IS FINALIZED AND EMAILED BACK TO THE BOARD PRIOR TO SUBMISSION TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C

ONCE A YEAR, EVERY OFFICER, DIRECTOR AND KEY EMPLOYEE IS ASKED TO REVIEW

THE CONFLICT OF INTEREST POLICY AND TO COMPLETE A FORM DISCLOSING ANY

POSSIBLE CONFLICT OF INTEREST.

1. DUTY TO DISCLOSE:

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE AND NATURE OF HIS OR HER FINANCIAL INTEREST TO THE BOARD OF DIRECTORS, OR COMMITTEE WITH BOARD-DELEGATED POWERS, WHILE THE BOARD OR COMMITTEE IS CONSIDERING A PROPOSED TRANSACTION.

2. DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS:

AFTER DISCLOSURE OF THE FINANCIAL INTEREST, THE INTERESTED PERSON SHALL LEAVE THE BOARD MEETING WHILE THE FINANCIAL INTEREST IS DISCUSSED. THE REMAINING BOARD MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS, SUBJECT TO THE APPLICATION OF PARAGRAPH 3A. THROUGH C. BELOW.

- 3. PROCEDURE FOR ADDRESSING THE CONFLICT OF INTEREST.
- A. THE CHAIRPERSON OF THE BOARD SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION.
- B. AFTER EXERCISING DUE DILIGENCE, THE INVESTIGATING PERSON OR COMMITTEE SHALL REPORT HIS OR ITS FINDINGS TO THE BOARD AS TO WHETHER KCS CAN

DISCUSSION OR VOTE.

Name of the organization Employer identification number
KANSAS CITY SYMPHONY 43-1297475

OBTAIN A MORE ADVANTAGEOUS TRANSACTION WITH REASONABLE EFFORTS FROM A
PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

C. IF A MORE ADVANTAGEOUS TRANSACTION IS NOT REASONABLY ATTAINABLE UNDER
CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE
BOARD SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS
WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO KCS AND IF SUCH
DECISION IS MADE, KCS MAY ENTER INTO THE TRANSACTION IN CONFORMITY WITH
SUCH DETERMINATION. THE INTERESTED DIRECTOR SHALL NOT BE PRESENT FOR THE

- 4. VIOLATIONS OF THE CONFLICT OF INTEREST POLICY:
- A. IF THE BOARD OR MEMBER OF THE BOARD OR STAFF HAS REASONABLE CAUSE TO BELIEVE THAT A DIRECTOR, OFFICER, MEMBER OF A COMMITTEE, OR KEY EMPLOYEE PERSON HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTERESTS, THE EXECUTIVE COMMITTEE SHALL BE NOTIFIED AND THE EXECUTIVE COMMITTEE SHALL INFORM SUCH PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD SUCH PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.

 B. IF, AFTER HEARING THE RESPONSE OF SUCH PERSON AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE EXECUTIVE COMMITTEE DETERMINES THAT SUCH PERSON HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL REPORT ITS FINDINGS TO THE FULL BOARD, IN THE CASE OF A MEMBER, OFFICER OR COMMITTEE MEMBER, OR TO THE EXECUTIVE DIRECTOR IN THE CASE OF A KEY EMPLOYEE (PROVIDED, HOWEVER, IF THE PERSON WHO FAILED TO MAKE THE APPROPRIATE DISCLOSURE IS THE EXECUTIVE DIRECTOR, THE FINDINGS SHALL BE REPORTED TO THE FULL BOARD)

AND THE FULL BOARD OR EXECUTIVE DIRECTOR SHALL TAKE APPROPRIATE

Name of the organization Employer identification number
KANSAS CITY SYMPHONY 43-1297475

DISCIPLINARY AND CORRECTIVE ACTION, WHICH MAY INCLUDE REMOVAL OR DISMISSAL.

SECTION E RECORDS OF PROCEEDINGS:

THE MINUTES OF THE BOARD AND ALL COMMITTEES WITH BOARD-DELEGATED POWERS SHALL CONTAIN:

- 1. THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE
 A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF
 INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO
 DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE BOARD'S,
 INVESTIGATING PERSON'S, COMMITTEE'S OR EXECUTIVE COMMITTEE'S DECISION AS
 TO WHETHER A CONFLICT OF INTEREST, IN FACT, EXISTED.
- 2. THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSION AND VOTING RELATING TO THE TRANSACTION OR ARRANGEMENT, A REASONABLE SUMMARY OF THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION THEREWITH. THE VOTES CAST BY PARTICULAR INDIVIDUALS SHALL NOT BE RECORDED, ONLY THE TOTALS.

FORM 990, PART VI, SECTION B, LINES 15A & B

THE EXECUTIVE DIRECTOR'S TOTAL COMPENSATION PACKAGE WAS BEEN REVIEWED BY

THE EXECUTIVE COMMITTEE AND THAT REVIEW HAS INCLUDED SALARY DATA

COLLECTED BY THE LEAGUE OF AMERICAN ORCHESTRAS FOR A BENCHMARK. CHANGES

IN THE TOTAL COMPENSATION HAVE BEEN MADE THAT ARE IN LINE WITH THE

PACKAGES OFFERED BY OTHER SYMPHONY ORCHESTRAS WITH LIKE SIZE ANNUAL

BUDGETS. THE BOARD PRESIDENT NOTIFIES THE DIRECTOR OF BUSINESS OPERATIONS

IN WRITING OF ANY CHANGES TO BE MADE IN THE TOTAL COMPENSATION OF THE

Schedule O (Form 990 or 990-EZ) 2013 Page **2**

Name of the organization Employer identification number
KANSAS CITY SYMPHONY 43-1297475

EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9

ENDOWMENT APPRECIATION

\$ 1,407,224

Exempt Organization Business Income Tax Return Form 990-T OMB No. 1545-0687 (and proxy tax under section 6033(e)) 07/01 , 2013, and ending For calendar year 2013 or other tax year beginning See separate instructions. Department of the Treasury Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Internal Revenue Service ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) D Employer identification number Check box if Name of organization (Check box if name changed and see instructions.) (Employees' trust, see instructions.) address changed **B** Exempt under section KANSAS CITY SYMPHONY **Print** X | 501(C)(3) Number, street, and room or suite no. If a P.O. box, see instructions. 43-1297475 E Unrelated business activity codes 408(e) 220(e) Type (See instructions.) 1703 WYANDOTTE STREET 408A 530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) C Book value of all assets KANSAS CITY, MO 64108 at end of year Group exemption number (See instructions.) ▶ Check organization type ► X 501(c) corporation 43,493,882. 501(c) trust 401(a) trust Other trust H Describe the organization's primary unrelated business activity. ▶ ATTACHMENT During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation. The books are in care of BARBARA TATE Telephone number ▶ 816-218-2610 (A) Income Part I Unrelated Trade or Business Income (C) Net (B) Expenses Gross receipts or sales b Less returns and allowances c Balance ▶ 1c Cost of goods sold (Schedule A, line 7) 2 2 3 3 Capital gain net income (attach Form 8949 and Schedule D) 4a 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) С 4c 5 Income (loss) from partnerships and S corporations (attach statement) 5 6 6 Unrelated debt-financed income (Schedule E) 7 7 8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F) 8 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule.) 12 0 Total. Combine lines 3 through 12. 13 Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, Part II deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K). 15 Salaries and wages 15 16 16 17 18 18 19 19 Charitable contributions (See instructions for limitation rules.) . . . 20 21 22 Less depreciation claimed on Schedule A and elsewhere on return . . . 22b 23 23 Contributions to deferred compensation plans 24 25 25 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 27 27 28 Other deductions (attach schedule) 29 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 31 31 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 32 32

JSA For Paperwork Reduction Act Notice, see instructions.

enter the smaller of zero or line 32

33

Form **990-T** (2013)

Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32,

Form **8868**

(Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

memai Kevenue	e Service			90				
	filing for an Automatic 3-Month Extension, o				▶			
-	filing for an Additional (Not Automatic) 3-Mo			, , ,				
Do not comp	plete Part II unless you have already been gran	nted an au	tomatic 3-month extens	sion on a previously filed Form 886	8.			
	ling (e-file). You can electronically file Form	•		•				
	n required to file Form 990-T), or an additior Juest an extension of time to file any of the							
	Transfers Associated With Certain Persona							
	For more details on the electronic filing of the							
	tomatic 3-Month Extension of Time. On				•			
	n required to file Form 990-T and requesting	•	<u> </u>	,				
•				•	▶ X			
All other cor	porations (including 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must use I	Form 7004 to request an extension	of time			
	e tax returns.	•		Enter filer's identifying number, so				
_	Name of exempt organization or other filer, see in	structions.		Employer identification number (EIN)	or			
Type or								
print	KANSAS CITY SYMPHONY			43-1297475				
File by the due date for	Number, street, and room or suite no. If a P.O. box	x, see instruc	ctions.	Social security number (SSN)				
filing your	1703 WYANDOTTE STREET							
return. See nstructions.	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.					
matructions.	KANSAS CITY, MO 64108							
Enter the Re	eturn code for the return that this application i	is for (file a	a separate application fo	or each return)	0 7			
		`		,				
Application		Return	Application		Return			
ls For		Code	Is For		Code			
Form 990 or	Form 990-EZ	01	Form 990-T (corporat	tion)	07			
Form 990-Bl	_	02	Form 1041-A		08			
Form 4720 ((individual)	03	Form 4720 (other tha	n individual)	09			
Form 990-PF		04	Form 5227		10			
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069		11			
Form 990-T	(trust other than above)	06	Form 8870		12			
• The book	s are in the care of ▶BARBARA_TATE, 17	<u>03_WYAN</u>	DOTTE_STREET,_SI	re 200 kansas city, mo (64105			
Telenhone	e No. ▶ 816 218-2610	,	FAX No. ▶					
	anization does not have an office or place of the	_		ck this hox				
	or a Group Return, enter the organization's for				nis is			
	e group, check this box							
	e names and EINs of all members the extensi		, , , , , , , , , , , , , , , , , , ,					
	est an automatic 3-month (6 months for a cor		equired to file Form 990	D-T) extension of time				
until	05/15 , 20 15 , to file the	exempt org	ganization return for the	e organization named above. The	extension is			
for the	organization's return for:							
▶	calendar year 20 or							
▶ X	tax year beginning07/	01, 20 13	3 _, and ending	06/30_, 20 _14				
	ax year entered in line 1 is for less than 12 m hange in accounting period	onths, ched	ck reason: Initial r	eturn Final return				
3a If this	application is for Form 990-BL, 990-PF, 99	0-T, 4720	, or 6069, enter the	tentative tax, less any				
	undable credits. See instructions.			3a \$	0			
	application is for Form 990-PF, 990-T,		=					
	ted tax payments made. Include any prior yea				0			
	e due. Subtract line 3b from line 3a. Include		ent with this form, if re	quired, by using EFTPS				
	(Electronic Federal Tax Payment System). See instructions.							
	u are going to make an electronic funds withdrawal	(direct deb	it) with this Form 8868, se	ee Form 8453-EO and Form 8879-EO f	or payment			
nstructions.								

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2014)

Form 990-T (2013) KANSAS CITY SYMPHONY 43-1297475 Page **2**

Par		Tax Computation	า									
35		zations Taxable as		See instructio	ns fo	or tax comp	utation. Cont	rolled aro	up			
	_	s (sections 1561 and 1	-					3 -	'			
		our share of the \$50,0	,				ckets (in that	order):				
	(1) \$ (2) \$ (3) \$											
b	Enter or	ganization's share of: (1)	Additional 5% tax (n	ot more than S	\$11,75	50)	\$					
	(2) Addi	tional 3% tax (not more	than \$100,000)				\$					
С	Income	tax on the amount on lin	ne 34						▶ 35c			
36		Taxable at Trust					ation. Incon		on			
	the amo	ount on line 34 from:	Tax rate schedule	or S	chedu	le D (Form 10-	41)		. ▶ 36			
37	Proxy ta	x. See instructions							. ▶ 37			
38	Alternat	ive minimum tax							38			
39	Total. A	dd lines 37 and 38 to lin	ne 35c or 36, whiche	ver applies	<u></u>				39			
Par	: IV	Tax and Payment	ts									
	_	tax credit (corporations					40a					
		redits (see instructions).					40b					
		business credit. Attach					40c					
		or prior year minimum ta										
		edits. Add lines 40a thro										
41	Subtrac	t line 40e from line 39.							I .			
42	Other tax	es. Check if from: Form	m 4255 Form 86	11 Form 8	8697	Form 8866	6 Other (at	ach schedul	e) . 42			
43		x. Add lines 41 and 42				1			43			0
44 a	Paymen	ts: A 2012 overpayment	t credited to 2013 .				44a					
		timated tax payments.					44b					
		osited with Form 8868.					44c					
	-	organizations: Tax paid		•	,		44d					
	•	withholding (see instruct	*				44e					
		or small employer health		,	,		44f					
g		redits and payments: orm 4136	Form	2439		Total	449					
45		ayments. Add lines 44a t							45			
46		ed tax penalty (see instr							46			
		. If line 45 is less than the						_				
		ment. If line 45 is large										
49		e amount of line 48 you want			Cittor	amount overpa		Refunded				
Par		Statements Rega			and	Other Info	rmation (se	ee instruc				
1	At any t	ime during the 2013 ca	alendar year, did the	organization ha	ave an	interest in or	a signature or	other auth	nority over	a financial	Yes	No
	account	(bank, securities, or other	er) in a foreign countr	ry? If YES, the	organi	zation may ha	ve to file Form	TD F 90-22	2.1, Report	of Foreign		
	Bank an	d Financial Accounts. If \	YES, enter the name	of the foreign o	country	y here 🕨						Х
2	During t	he tax year, did the orga	anization receive a di	istribution from	n, or w	as it the gran	tor of, or trans	feror to, a	foreign trus	t?		Х
	If YES, s	ee instructions for other	forms the organization	on may have to	file.							
		e amount of tax-exempt										
Sch	edule	A - Cost of Goods	s Sold. Enter met	thod of inven	tory v	valuation ►						
		ry at beginning of year.					end of year					
2	Purchas	es			7	Cost of go	oods sold. S	ubtract li	ne			
		labor	3		-		e 5. Enter h					
		al section 263A costs										
		schedule)			8		es of section		•	•	Yes	No
		osts (attach schedule)			-		oduced or	•		,		37
		dd lines 1 through 4b . penalties of perjury, I declare		ic return including	2.0000	to the organiz	ration?	and to the h	oct of my kr	owlodge and h	voliof it	X is true
Qia-	correc	t, and complete. Declaration of p	preparer (other than taxpaye	r) is based on all inf	formatio	n of which prepare	er has any knowledg	e.	JOSE OF HIS KI		onor, il	is title,
Sign				1						IRS discuss		
Here		ature of officer		Date		Title			with the (see instruc	preparer sh		below No
	J.9.	Print/Type preparer's name	ie	Preparer's si	gnature		Date			PTIN	, ,	140
Paid		MICHAEL J ENGLE		.,	J				Check L i self-employe	†	8283	4
Prep		Firm's name BKD,							Firm's EIN			
Use	Only	Firm's address > 1201		TE 1700					Phone no.	816 22		
-		,	SAS CITY, MO	64106-22	46					Form 9 9		

JSA 3E1620 1.000

Page 3 Form 990-T (2013)

Schedule C - Rent Income (see instructions)	(From Real Pr	operty a	nd Personal Prope	erty	Leased Wi	th Real Prope	erty)	
1. Description of property								
(1)								
(2)								
(3)								
(4)								
	2. Rent receiv	ed or accru	ed					
(a) From personal property (if the for personal property is more th more than 50%)		percent	From real and personal pro tage of rent for personal pro r if the rent is based on pro	perty	exceeds			nected with the income) (attach schedule)
(1)								
(2)								
(3)								
(4)								
Total		Total				(b) Total deduction	one	
(c) Total income. Add totals of conere and on page 1, Part I, line 6	, column (A)	. ▶				Enter here and o Part I, line 6, colu	n page 1,	
Schedule E - Unrelated Do	ept-Financed in	come (se	ee instructions)		3 Dec	ductions directly co	nnected wi	th or allocable to
1. Description of deb	at-financed property		2. Gross income from allocable to debt-finance		0. 500		ced propert	
1. Description of dec	t interioca property		property	eu		ine depreciation schedule)		Other deductions attach schedule)
(4)					(attacii	scriedule)	(6	attach schedule)
(1)								
(2)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	acquisition debt on or of or allocable to debt-financed debt-financed property		6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)			llocable deductions n 6 x total of columns 3(a) and 3(b))
(1)				%				
(2)				%				
(3)				%				
(4)				%				
Totals		 Jumn 8		>		and on page 1, 7, column (A).		ere and on page 1, line 7, column (B).
Schedule F - Interest, Ann			ents From Contro	lled	Organizati		uctions)	
			xempt Controlled Or			(000		
Name of controlled organization	2. Employer identification num		3. Net unrelated income (loss) (see instructions)	4 . To	otal of specified syments made	5. Part of column included in the corganization's gro	controlling	6. Deductions directly connected with income in column 5
(1)								
(2)								
(3)								
(4)								
Nonexempt Controlled Organ	nizations		1					
7. Taxable Income	8. Net unrelated (loss) (see instru		9. Total of specific payments made		include	t of column 9 that is ed in the controlling ation's gross income	cor	Deductions directly nected with income in column 10
(1)								
(2)								
(3)								
(4)								
					Enter h	columns 5 and 10. here and on page 1, line 8, column (A).	Ent	dd columns 6 and 11. ter here and on page 1, art I, line 8, column (B).
Totals					P			

Form **990-T** (2013)

Schedule G - Investment In	come of a Sec	ction 501(c)(7),	(9), or (17) Orga	nizat	ion (see inst	ruct	ions)			
1. Description of income	2. Amount o	f income		3. Deductions directly connected (attach schedule)		4. Set (attach				Total deductions d set-asides (col. 3 plus col. 4)	
(1)											
(2)											
(3)											
(4)											
	Enter here and Part I, line 9, c									here and on page 1, I, line 9, column (B).	
Totals ▶											
Schedule I - Exploited Exe	mpt Activity In	come, Othe	r Tha	an Advertising In	icom	e (see instru	ctio	ns)			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expense directly connected v production unrelated business inco	vith of	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	fror is	Gross income n activity that not unrelated siness income		6. Expenses ittributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)											
(2)											
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col.	t I,							Enter here and on page 1, Part II, line 26.	
Totals ▶ Schedule J - Advertising In	nome (assimate	u cationo)									
			naali	datad Basis							
Part I Income From Periodical	2. Gross advertising income	3. Direct advertising of		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5	. Circulation income	6. Readership costs		6. Readership costs minus		7. Excess readership costs (column 6 ninus column 5, but not more than column 4).
(1)											
<u>(1)</u> (2)									_		
(3)									-		
(4)									\dashv		
(4)											
Totals (carry to Part II, line (5))											
Part II Income From Pe 2 through 7 on a li			Sepai	rate Basis (For e	each	periodical I	iste	d in Part	II, fi	ill in columns	
1. Name of periodical	2. Gross advertising income	3. Direct advertising o		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5	. Circulation income	6. Readership costs			7. Excess readership costs (column 6 ninus column 5, but not more than column 4).	
(1)											
(2)											
(3)											
(4)											
Totals from Part I											
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Pai line 11, col.	rt I							Enter here and on page 1, Part II, line 27.	
Schedule K - Compensatio	n of Officers. Γ)irectors, ai	nd Tr	u stees (see instri	uction	s)					
1. Name	, <u>-</u>			2. Title		3. Percent of time devoted to				on attributable to	
(1) ATCH 2					+	business	%				
(2)		+			+		% %				
(3)		+			+		% %				
(4)											
Total. Enter here and on page 1, P	art II, line 14						. >				
104	, - '• • •							!	F	orm 990-T (2013	

ATTACHMENT 1

ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY.

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.

ATTACHMENT 2

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
SHIRLEY B. HELZBERG 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/CHAIR EMERITUS	0	0
ROBERT A. KIPP 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/VICE PRESIDENT	0	0
MICHAEL D. FIELDS 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/VICE PRESIDENT	0	0
WILLIAM M. LYONS 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/PRESIDENT	0	0
JOSHUA SOSLAND 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/VICE PRESIDENT	0	0
WILLIAM B. TAYLOR 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/SECRETARY/TREASURER	0	0
CHRISTINE GROSSMAN 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
SOO JEE YANG 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0

ATTACHMENT 2 (CONT'D)

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
JOAN HORAN 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
PETER S. LEVI 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
PATRICK A. PERSOHN 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
TOM BOWSER 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
RICHARD MILLER 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
TERRY BASSHAM 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
CARY DECAMP 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
ANN KAUFMANN BAUM 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR/VICE PRESIDENT	0	0

ATTACHMENT 2 (CONT'D)

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
JOHN EDGAR 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
ELIZABETH SHELLHASE GRAY 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
VINCE CLARK 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
MARY LOU TURNER 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
JAMIE MONTGOMERY HELZBERG 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
SARAH ROWLAND 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
KRISTIN VELICER 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR	0	0
BARBARA TATE 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	DIRECTOR BUSINESS OPERATIONS	0	0

ATTACHMENT 2 (CONT'D)

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
FRANK BYRNE 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	EXECUTIVE DIRECTOR	0	0
MICHAEL STERN 1703 WYANDOTTE STREET STE 200 KANSAS CITY, MO 64108	MUSIC DIRECTOR	0	0
TOTAL COMPENSATION			0