Form 990 P	Return of Organization Exempt From Incor Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (excep Do not enter social security numbers on this form as it may be m	ot private foundation ade public.	Open to Public
A For the 2018 calend	■ Go to www.irs.gov/Form990 for instructions and the latest info dar year, or tax year beginning 07-01, 2018, and er		Inspection 5-30 .2019
B Check if applicable Address change	C Name of organization South Florida Youth Symphony Inc Doing business as		D Employer identification no. 59-6212162
Name change Initial return	Number and street (or P O box if mail is not delivered to street address) 12645 SW 114 Ave	Room/suite	E Telephone number (305) 238-2729
Final return/terminated Amended return	City or town, state or province, country, and ZIP or foreign postal code Miami, FL 33176		G Gross receipts \$ 358,244
Application pending Tax-exempt status	F Name and address of principal officer 501(c)(3) □ 501(c) () ◀ (insert no) □ 4947(a)(1) or □ 527	H(a) Is this a group return H(b) Are all subordinat	
	w.SFYS.net	H(c) Group exemptio	, ,
K Form of organization X Part I Summai		964 M State of leg	gal domicile FL
for purp performa 2 Check this b	probe the organization's mission or most significant activities The Organization poses of teaching the art and performance of music. Indicates in front of audiences are essential to the teaching poses The Organization of the continued its operations or disposed of more than 25% of the continued members of the content pools (Part VI) line 12)	ividualized in ng/learning pr	struction and ocess.

Expense 0 1 C & The MED AUG 1 7 2021 5 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 20 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 38 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 171<u>,</u>562 140,257 Program service revenue (Part VIII, line 2g) 110,429 214,628 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,122 3,359 12 https://ex. through 11 (must equal Part VIII, column (A), line 12) 283,113 358,244 rants and similar amounts (Part IX, column (A), lines 1-3) (Part IX, column (A), line 4) alaries, other compensation nployee benefits (Part IX, column (A), lines 5-10) 24,583 <u>9,7</u>50 art IX, column (A), line 11e) (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 235,734 355,239 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 260,317 364,989 Revenue less expenses Subtract line 18 from line 12 . (6,745) 22,796 Net Assets or Fund Balances **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 128,089 124,144 21 Total liabilities (Part X, line 26) 6,621 9,421 22 Net assets or fund balances Subtract line 21 from line 20 114,723 121,468 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is r (other than officer) is based on all information of which preparer has any knowledge Sign Here Marjorie J Hahn, Executive Director Type or print name and title Preparer's signature Trina Maste if PTIN Print/Type preparer's name Paid Erina Master P01466697 Preparer Firm's name Broward Tax Services Firm's EIN ▶ **Use Only** 6260 Johnson St Ste 101 Firm's address Phone no Hollywood FL 33024 954-864-1117 X No May the IRS discuss this return with the preparer shown above? (see instructions) Yes For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2018)

EEA

Form	990 (2018) South Florida Youth Symphony Inc	59-6212162	Page 2
	rt III Statement of Program Service Accomplishments		-
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	<u> </u>
1	Briefly describe the organization's mission		
	The Organization operates a youth symphony for purposes of teaching the art	and performa	nce
	of music. Individualized instruction and performances in front of audiences	are essentia	al to
	the teaching/learning process.		
	Didth		-
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	П у	₩ Na
	If "Yes," describe these new services on Schedule O	⊔ tes	X NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
3	services?	□ves	₩ No
	If "Yes," describe these changes on Schedule O	· · · · □ 163	(A) 140
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	ed by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	-	
	the total expenses, and revenue, if any, for each program service reported		
4a			,628)
	Successfully educated over 250 students in music theory and performance in f		
	audiences during tax year. Program service accomplishments include corporate	/foundation	in
	kind donations of over \$60k and volunteer hours of over \$55k.		
			
4b	(Code) (Expenses \$ including grants of \$) (Revenue	<u> </u>	<u> </u>
			
		 -	
4c	(Code) (Expenses \$ including grants of \$) (Revenue		
40	(Code) (Expenses \$ including grants of \$) (Revenue	\$	/
		<u> </u>	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 334,359		

Part IV

Checklist of Required Schedules

Page 3

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, \mathbf{X}_{-} assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III. 5 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 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Х Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII. VIII. IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more Х 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more 11c 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 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a **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 12b X X 13 13 Х 14a **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 Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 Х 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Х 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X 19 Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?........ 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х

-30				1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes_	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
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 I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
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			.,
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
•	Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If IVee II complete School IV.	20-		v
b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
•	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		X
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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
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		Х
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			17
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
36	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		v.	
Part		38	X	
. 411	Check if Schedule O contains a response or note to any line in this Part V			\Box
	C. 25 Contains a respense of field to dry lifte in this fact v	1	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Form 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	Х	

Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-20-20	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
_	If "Yes," complete Form 4720, Schedule O			

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 5 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 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Х 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 Х supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 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? X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X Яa Х Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? X 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Х 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed
Florida 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website X 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 interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records Ofelia Arlotta (305)238-2729, 12645 SW 114 Ave, Miami, FL 33176

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Form 990 (20	South Florida Youth Symphony Inc	59-6212162	Page 7			
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	<u></u>				
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees					
1a Complete organization's	this table for all persons required to be listed. Report compensation for the calendar year ending with or within tax year.	the				
	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of an Enter -0- in columns (D), (E), and (F) if no compensation was paid	mount of				

- 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 relate	d organizatio	n comp	ens	ated	any	/ curre	nt of	ficer, director, or tr	ustee	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	untes er and	Pos eck m ss per d a dir	son is	han one as both as both as fitrustee employee	n)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Marjorie J Hahn Executive Director				х				16,125	0	0
(2) Jake Monk President				х				0	0	0
(3) Christine Padron				X					0	0
(4) Alix Harper Vice President				X						0
(5) Ofelia Arlotta Treasurer				X				0	0	0
(6) Bobby Bush				Х				o	0	0
(7)								-		
(8)		_								
(9)										
(10)										
(11)								-		
(12)								·- · · · · · · · · · · · · · · · · · ·		
(13)								-	_	
(14)										
FFA									<u>.</u>	Form 990 (2018)

Form 990 (2018)

Tail VIII Section	A. Officers, Directors, Trustees	, itey Emplo	yees,	ariu				ipei	isatea Employee.	Continuedy	Т	
•		45.	(C)						4-1			-
•	(A)	(B)	Position (do not check more than one						(D)	(E)		(F)
ſ	Name and title	Average box, unless person is both an officer and a director/trustee)							Reportable compensation	Reportable compensation from		mated ount of
		week (list any	ek (list any					7	from	related	1	other
		hours for related	Individual trustee or director	Institutional truste	Officer	Key employee	nplo	orme	the organization	organizations (W-2/1099-MISC)		ensation om the
		organizations	ctor	liona]	n pio	yee 8	٦	(W-2/1099-MISC)		-	nization
		below dotted line)	ruste	trus		èe	mper				1	related nizations
			Ф	tee			employee					
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(25)												
* -/												
1b Sub-total	• • • • • • • • • • • • • • • • • • • •	• • • • • •			• •			•				
	inuation sheets to Part VII, Sectio			• • •	• •			•				
	1b and 1c)							<u> </u>	16,125		<u> </u>	0
	individuals (including but not limited	to those liste	ed abo	ve)	who	rec	eivedi	more	e than \$100,000 of			
reportable comp	pensation from the organization									0		Yes No
3 Did the organiza	ation list any former officer, director	r. or trustee.	kev er	olan	vee.	or i	niahes	t co	mpensated		\Box	103 110
-	e 1a? If "Yes," complete Schedule		-	•	-		_		•		3	Х
4 For any individua	al listed on line 1a, is the sum of rep	ortable comp	ensati	on a	nd o	ther	comp	ensa	ition from the			
	d related organizations greater thar										 	
	• • • • • • • • • • • • • • • •									• • • • • • • •	4	X
	isted on line 1a receive or accrue co										<u>-</u>	V
	dered to the organization? If "Yes," ndent Contractors	complete Sc	riedui	e J I	or st	<u>icn</u>	persoi	<u>''</u>			5	X
	ble for your five highest compensate	d independer	t conti	acto	ors th	nat re	eceive	d m	ore than \$100,000	of		
	om the organization Report comper											
year												
	(A)								(B)		(C)
	Name and business address								Description of s		Compe	
Music Contact In	ternational, 119 S Win	ooski Av	e, V	T C)540	01_			Touring/T	ravel		121,455
2 Total number of	independent contractors (including l	out not limited	d to th	ose	listed	d ab	ove) v	vho				
received more th	nan \$100.000 of compensation from	the organizat	tion	•						1		

Part VIII

		Check if Schedule O contains a response or n	ote to any line in thi	s Part VIII		<u></u>	<u> </u>
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b						
يَّ قِ	C	Fundraising events 1c					
ifts,	ď						
2 =			60 330				
Sir	e		69,328				
ther The	f	All other contributions, gifts, grants,	70.000				
E O		and similar amounts not included above 1f	70,929				
SE	9	Noncash contributions included in lines 1a-1f \$				·····	
	h	Total. Add lines 1a-1f		140,257			
6	١.		Business Code				
Program Service Revenue		Touring Fees	561500	156,519	156,519		
æ	1	Concert Admissions	711130	9,733	9,733		
<u>8</u>	i	Camp & Season Tuition	711130	48,376	48,376	 ,	
Š	d						i
J78T	e						
Proj	l	All other program service revenue					
	9	Total. Add lines 2a-2f	• • • • • • •	214,628			
	3	Investment income (including dividends, interest,					
		and other similar amounts)					
	l	Income from investment of tax-exempt bond proce					
	5	Royalties	• • • • • • • • • • • • • • • • • • •				
		(ı) Real	(ii) Personal				
	l	Gross rents					
	l	Less rental expenses		}			
	ı	Rental income or (loss)					
	d	Net rental income or (loss)	• • • • • • • • • • • • • • • • • • •			···	
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	b	Less cost or other basis					
		and sales expenses					
	l	Gain or (loss)					<u> </u>
4		Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	_			
Other Revenue	8a	Gross income from fundraising					
Š	ļ	events (not including \$		İ]
Ę		of contributions reported on line 1c)			1		
흝		See Part IV, line 18 a			İ		
0		Less direct expenses b				 	
	9a	Gross income from gaming activities					
		See Part IV, line 19 a	-				
		Less direct expenses b					
	С	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less					
		returns and allowances a					
		Less cost of goods sold b					
	C	Net income or (loss) from sales of inventory		-			
	110	Miscellaneous Revenue	Business Code				
	b						
	C	· · · · · · · · · · · · · · · · · · ·					
	_	All other revenue	900099	3,359	3,359		
		Total. Add lines 11a-11d		3,359	3,339		
		Total revenue. See instructions	· .	358,244	217,987	0	0
				777722	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>

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

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to	any line in this Part IX	· · · <u>·</u> · · · · ·	<u> </u>	<u> </u>
	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 domestic organizations		evherises	goneral expenses	6/h01/3023
•	and domestic governments See Part IV, line 21			İ	
2	Grants and other assistance to domestic				
_	Individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	9,750	9,750		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			İ	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes [
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	5,550		5,550	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17 .			· · · · · · · · · · · · · · · · · · ·	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	84,294	84,294		
12	Advertising and promotion	18,530	18,530		
13	Office expenses	11,571		11,571	
14	Information technology	2,087		2,087	
15	Royalties				
16	Occupancy	25,818	25,818		
17	Travel	178,456	178,456		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,521			3,521
20	Interest	_	-		
21	Payments to affiliates				_
22 23	Depreciation, depletion, and amortization	2,846	2,346	500	_
23 24	Other expenses Itemize expenses not covered				
E.*	above (List miscellaneous expenses in line 24e If	ſ			•
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)		1		
а	Supplies	17,204	15,165	787	1 252
a b	Bank Service Charges	5,362	15,165	5,362	1,252
C	Bunn Bervice Charges	5,302		5,362	
d		-			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e .	364,989	334,359	25,857	4,773
26	Joint costs. Complete this line only if the	304,303	334,333	25,657	4,113
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ► ☐ If	ł			

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		• • • •	
	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	40,794	1	39,695
	2	Savings and temporary cash investments		2	
Assets	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			:
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions) Complete Part II of Schedule L		6	
co.	7	Notes and loans receivable, net		7	
set	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	·	9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 104,909	 		
	b	Less accumulated depreciation 10b 20,460	87,295	10c	84,449
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11	<u> </u>	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		1 39, 2 3 3 4 5 5 6 7 8 9 10c 84, 11 12 13 14 15 16 124, 17 5, 18 19 4, 20 21 22 23 24 25 26 9, 27 114, 28 29 30 31 32 33 114,	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	128,089	16	124,144
	17	Accounts payable and accrued expenses	2,200		5,000
	18	Grants payable			
	19	Deferred revenue	4,421		4,421
	20	Tax-exempt bond liabilities			
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
ig		trustees, key employees, highest compensated employees, and			
Lia	22	disqualified persons Complete Part II of Schedule L			
	23 24	Secured mortgages and notes payable to unrelated third parties			
	2 4 25	Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	6,621		9,421
		Organizations that follow SFAS 117 (ASC 958), check here \blacktriangleright 🗓 and	0,022		7,122
S		complete lines 27 through 29, and lines 33 and 34.			
ဦ	27	Unrestricted net assets	121,468	27	114,723
aga	28	Temporarily restricted net assets		28	
9 P	29	Permanently restricted net assets		29	
ᇤ		Organizations that do not follow SFAS 117 (ASC 958), check here and			
Net Assets or Fund Balances		complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Şe	32	Retained earnings, endowment, accumulated income, or other funds		32	
_	33	Total net assets or fund balances	121,468_	33	114,723
	34	Total liabilities and net assets/fund balances	128.089	34	124.144

Form	n 990 (2018) South Florida Youth Symphony Inc 59-62		62	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u>. 🗆</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		358,	244
2	Total expenses (must equal Part IX, column (A), line 25)	2		364,	989
3	Revenue less expenses Subtract line 2 from line 1	3		(6,	745)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		121,	468
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		114,	723
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990		1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O		<u> </u>		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both		İ		
	Separate basis Consolidated basis Both consolidated and separate basis		<u></u>		
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		1	•	
	Schedule O				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		
EEA			Form	990 (2018)

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.

▶ Attach to Form 990 or Form 990-EZ.

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer Identification number

Sou	th	Florida Youth Symphony I	nc				59-62121	162			
Pa	rt I	Reason for Public Charit	y Status (All or	rganizations must c	omplete	this par	t) See instruction	ns			
The	orga	nization is not a private foundation bec	ause it is (For lines	s 1 through 12, check on	ly one box)					
1		A church, convention of churches, or	r association of chu	urches described in sec t	tion 170(b)(1)(A)(i).			1		
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990	or 990-EZ))		′/ \			
3		A hospital or a cooperative hospital	service organizatio	n described in section 1	170(b)(1)(<i>A</i>	A)(iii).		(- 1		
4		A medical research organization ope	erated in conjunctio	n with a hospital describ	oed in sect	ion 170(b)(1)(A)(iii). Enter the		(
	_	hospital's name, city, and state									
5	Ш	An organization operated for the ben-	efit of a college or u	university owned or oper	ated by a 🤉	governmen	ital unit described in				
	_	section 170(b)(1)(A)(iv). (Complete Part II)									
6											
7	X										
		described in section 170(b)(1)(A)(vi		•							
8	님	A community trust described in sect									
9	Ш	An agricultural research organization					_	lege			
		or university or a non-land-grant colle	ege of agriculture (s	see instructions) Enter th	e name, ci	ty, and sta	te of the college or				
40	\Box	university	(1) (1) 05								
10	Ц	An organization that normally receive		• •				SS			
		receipts from activities related to its	•		-	•					
		support from gross investment incom		•		,	rom businesses				
11		acquired by the organization after Ju			•						
12	H	An organization organized and opera An organization organized and opera	-	•							
12		of one or more publicly supported or									
		Check the box in lines 12a through 13	-				•				
	а	Type I. A supporting organizatio									
	-	the supported organization(s) the						******g			
		supporting organization You mu			, ky 0, tho c	2.11 001070 01	11 4 5 15 15 15 15 15 15 15 15 15 15 15 15 1				
	b	Type II. A supporting organization			ith its supr	orted ora	anization(s), by havir	na			
		control or management of the su									
		organization(s) You must com					goo copposio	-			
	С	☐ Type III functionally integrated			nnection w	ith, and fu	nctionally integrated	with,			
		its supported organization(s) (se									
	d	☐ Type III non-functionally integ						tion(s)			
		that is not functionally integrated	The organization g	generally must satisfy a d	listribution i	requiremen	nt and an attentivenes	ss			
		requirement (see instructions) Y	ou must complete	e Part IV, Sections A a	nd D, and	Part V.					
	е	☐ Check this box if the organization				a Type I,	Type II, Type III				
		functionally integrated, or Type II	I non-functionally in	ntegrated supporting org	anızatıon						
	f	Enter the number of supported organ	izations								
	g	Provide the following information abo	ut the supported or	ganization(s)			· · · · · · · · · · · · · · · · · · ·		•••		
	(I)	Name of supported organization	(II) EIN	(iii) Type of organization	(iv) is the o	_	(v) Amount of monetary	(vi) Amo			
				(described on lines 1-10 above (see instructions))	docum	ir governing ient?	support (see instructions)	other supp			
						·			,		
					Yes	No					
(A)					l			}			
							<u> </u>				
(B)											
									-		
(C)											
		**-									
(D)											
'E\						-					
(E)											
					1						

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

Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	82,284	223,523	150,914	171,562	140,257	768,540	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		4		-			
3	The value of services or facilities furnished by a governmental unit to the organization without charge			70,430	66,450	77,100	213,980	
4	Total. Add lines 1 through 3	82,284	223,523	221,344	238,012	217,357		
5	The portion of total contributions by						<u> </u>	
	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)						90,575	
6	Public support. Subtract line 5 from line 4						891,945	
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
7	Amounts from line 4	82,284	223,523	221,344	238,012	217,357	982,520	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	86,443		76,574	111,551	217,987	492,555	
11	Total support. Add lines 7 through 10 .						1,475,075	
12	Gross receipts from related activities, etc. (s	see instructions)				12		
13	First five years. If the Form 990 is for the organization, check this box and stop here						▶ □	
Sec	tion C. Computation of Public Su	pport Percent	tage					
14	Public support percentage for 2018 (line 6, c	column (f) divided b	y line 11, column (f))		14	60.47 %	
15	Public support percentage from 2017 Sched	lule A, Part II, line 1	14			15	70.35 %	
16a	33 1/3% support test - 2018. If the organiz	zation did not chec	k the box on line 1	3, and line 14 is 33	3 1/3% or more, ch	eck this		
	box and stop here. The organization qualif	fies as a publicly su	upported organizat	ion			▶ 🛚 🛣	
b	33 1/3% support test - 2017. If the organiz	zation did not chec	k a box on line 13	or 16a, and line 15	s is 33 1/3% or mo	re, check		
	this box and stop here. The organization of	qualifies as a public	ly supported organ	nization		• • • • • • • •	▶ 🔲	
17a	10%-facts-and-circumstances test - 2018	B. If the organization	on did not check a	box on line 13, 16a	a, 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 VI how the organization meets the "fac	ts-and-circumstand	es" test The organ	nization qualifies as	a publicly support	ed		
	organization						▶ 🛚	
b	10%-facts-and-circumstances test - 2017	7. If the organization	on did not check a	box on line 13, 16a	a, 16b, or 17a, and	line		
	15 is 10% or more, and if the organization i	meets the "facts-ar	nd-circumstances"	test, check this bo	x and stop here.			
	Explain in Part VI how the organization mee	ets the "facts-and-c	rcumstances" test	The organization of	qualifies as a public	oly		
	supported organization						▶ 🔲	
18	Private foundation. If the organization did	not check a box of	n line 13, 16a, 16b	o, 17a, or 17b, ched	ck this box and see)	_	
	instructions		<u> </u>				▶ 🔲	

			outh Symphon			59-621216	2 Page 3
Pa	rt III Support Schedule for Org						
	(Complete only if you check						r Part II.
_	If the organization fails to qu	uality under th	e tests listed b	elow, please co	mplete Part II)	
-	ction A. Public Support					4) 00/0	1 17 7 1 1
Cal	endar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees		Í				
2	received (Do not include any "unusual grants") 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		ĺ				<i>Y</i>
3	Gross receipts from activities that are not an	- 					
3	unrelated trade or business under section 513 .						· ·
4	Tax revenues levied for the						
7	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						-
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons				/		
b	Amounts included on lines 2 and 3			/			
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
_	line 6)					<u> </u>	
<u>Se</u>	ction B. Total Support				····	,	,
Cale	endar year (or fiscal year beginning in) 🕨 📙	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources		<u> </u>				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
^	acquired after June 30, 1975						
		_/					-
11	Net income from unrelated business						

b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			
C	Add lines 10a and 10b			_
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on /			
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			
13	Total support. (Add lines 9, 10¢, 11, and 12)			

14	organization, check this box and stop here		
Se	ction C. Computation of Public Support Percentage	• • •	<u> </u>
15	Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	9/
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	%
Se	ction D. Computation of Investment Income Percentage		
17	Investment incomé percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from 2017 Schedule A, Part III, line 1.7	18	%
19a	33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	and li zation	ne
	331/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported or		
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instruction	ນ	<u></u> ▶ 🔲

Supporting Organizations

	(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete	complet	e
Sec	tion A. All Supporting Organizations	<u>. u. v.</u>	<u>'</u>
			Yes
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status	[

- under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer
- (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (II) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Vaa	No
[Yes	No
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1		
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2		
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		:
3b		
3c		<u> </u>
4a		
4b		
4c		
10		
5a		1
5b		
5c		
6		
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7		
8		<u> </u>
9a		
9b		
00		
_9c		
100		
10a		
10b		

	ule A (Form 990 or 990-EZ) 2018 South Florida Youth Symphony Inc 59-6212162	<u> </u>	P	age
Pal	TIV Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the arganization energic for the handlit of any augmented arganization other than the augmented			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		لـــــــــــــــــــــــــــــــــــــ	<u> </u>
<u> </u>	tion of Type it dapporting digatizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		-
Sec	tion E. Type III Functionally Integrated Supporting Organizations		نـــــا	L
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	struc	tions).
	The organization satisfied the Activities Test <i>Complete line 2 below</i> .		•	
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see in	struct	tions
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		

3 Parent of Supported Organizations Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

За

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganız	zations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See						
instructions. All other Type III non-functionally integrated supporting organization	ation	s must complete Section				
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3	4	,				
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1 Aggregate fair market value of all non-exempt-use assets (see		•				
instructions for short tax year or assets held for part of year)						
Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other						
factors (explain in detail in Part VI)						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d	3					
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,						
see instructions)	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by 035	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2	··				
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions)	6					
7 Check here if the current year is the organization's first as a non-functionally	intear	rated Type III supporting	organization (see			

instructions)

Page 7

Pa	rt V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organia	zations (continued)	
Sec	etion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes	<u>.</u>	
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizat	ions	<u>_</u>
4				· · · · · · · · · · · · · · · · · · ·
5	1			
6	Other distributions (describe in Part VI) See instructions		· · · · · · · · · · · · · · · · · · ·	
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	e organization is respons	sive	
	(provide details in Part VI) See instructions			· -
9				
10	Line 8 amount divided by Line 9 amount			
8	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI) See			
	instructions			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
_ b	Applied to 2018 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result		•	
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2019 Add lines 3j			
	and 4c.			
8	Breakdown of line 7			
а	Excess from 2014			
b	Excess from 2015			
	Excess from 2016			
	Excess from 2017			**

e Excess from 2018

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

12a, or 12b.

2018

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name	of the organization	Employer identification number
So	th Florida Youth Symphony Inc	59-6212162
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accou	nts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year) .	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in 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 funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	
Pa	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 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)	y important land area
	Protection of natural habitat Preservation of a certified h	nistoric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a cor	nservation
	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
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	ization 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, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easi	sements during the year
	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(* * * *
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stater	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	describes the
Da	organization's accounting for conservation easements	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Otl	ner Similar Assets.
4-	Complete if the organization answered "Yes" on Form 990, Part IV, line 8	· · · · · · · · · · · · · · · · · · ·
ıa	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement an	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fu	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these item	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and b	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fu	rtherance of
	public service, provide the following amounts relating to these items	
	(i) Revenue included on Form 990, Part VIII, line 1	
_	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990. Part X	▶ \$

84,449

Part VII	Complete if the organization answer	ered "Yes" on Form 990. F	Part IV. line 11b See Form 990). Part X. line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuat Cost or end-of-year marke	ion
(1) Euganoral	(including name of security) derivatives		Cost of end-of-year marke	
` .	eld equity interests	·	-	<u> </u>
(3) Other	ora equity manesar vivia vivia vivia vivia		-	
(A)				
(B)		-		
(C)				
(D)				
(E)				
(F) _				
(G)				
(H)				
Total. (Column (b)	must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related. Complete if the organization answer	ered "Yes" on Form 990, F	Part IV, line 11c See Form 990	, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuat Cost or end-of-year marke	
_(1)	· ————————————————————————————————————			
(2)				
(3)				
(4)				
(5)				-
(6)				
				
(8)				
<u>(9)</u>				
) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.	arad "Vaa" an Farm 000 F	Part IV I Inc. 11d Co. Form 000	N Dort V June 15
	Complete if the organization answer		rant IV, line 11d. See Form 990	
(1)		a) Description		(b) Book value
<u>(1)</u> <u>(2)</u>				
(3)		••		
(4)		·		
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) lin	e 15)		
Part X	Other Liabilities.			
	Complete if the organization answer	ered "Yes" on Form 990, F	Part IV, line 11e or 11f See Fo	rm 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2)				
(3)				
_(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b)	must equal Form 990, Part X, col (B) line 25)			·
2. Liability for	uncertain tax positions. In Part XIII, provide the	e text of the footnote to the organ	ization's financial statements that repor	ts the
organization's	liability for uncertain tax positions under FIN 48	3 (ASC 740) Check here if the te	xt of the footnote has been provided in	Part XIII

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 **2018**

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

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

59-6212162 South Florida Youth Symphony Inc 01. Form 990 governing body review (Part VI, line 11) The Executive Director of the Organization reviews Form 990 before it is filed. However, all financial statements and results are reviewed with the board of directors monthly. Year end financials are reviewed as soon as possible. 02. CEO, executive director, top management comp (Part VI, line 15a) Board of Directors is an all volunteer group. No Trustees are compensated. Compensation of executive director and all independent contractors are compared to salary surveys annually. Last survey was undertaken July 2014. Board of Directors reviews and approves budget annually. 03. Governing documents, etc, available to public (Part VI, line 19) No documents available to the public. 04. List of other fees for services expenses (Part IX, line 11g) Coaches and Conductors for the Regular Season and Summer Camp