TAX RETURN FILING INSTRUCTIONS

** FORM 990-T PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING

AUGUST 31, 2020

PREPARED FOR:	
PITTSBURGH SYM	PHONY INC.
600 PENN AVENUE	
PITTSBURGH, PA	15222-3209
PREPARED BY:	
SCHNEIDER DOWN ONE PPG PLACE, S	SUITE 1700
PITTSBURGH, PA	15222
AMOUNT DUE OR REFUND:	
NOT APPLICABLE.	
MAKE CHECK PAYABLE TO:	
NOT APPLICABLE	
MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:
NOT APPLICABLE.	
RETURN MUST BE MAILED ON O	R BEFORE:
NOT APPLICABLE.	
SPECIAL INSTRUCTIONS:	

THIS COPY OF THE RETURN IS PROVIDED ONLY FOR PUBLIC DISCLOSURE PURPOSES.

** PUBLIC DISCLOSURE COPY **

Form 990-T	E		inization Bus			Гах Returr	ı L	OMB No. 1545-0047	
		•	and proxy tax unde			24 000		2040	
	For ca		ear beginning SEP 1,				<u>:0</u> .	ZU 19	
Department of the Treasur Internal Revenue Service	ry	■ Go to www.irs.gov/Form990T for instructions and the latest information. ■ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).							
A Check box if address char	nged	Name of organization (Check box if name ch	nanged a	nd see instructions.)		(Emplo	yer identification number byees' trust, see ctions.)	
B Exempt under sec	tion Print	PITTSBURGH	SYMPHONY INC	. <u> </u>				5-0986052	
X = 501(c)(3) or Type		m or suite no. If a P.O. box	, see ins	tructions.			ted business activity code astructions.)	
	20(8)	600 PENN AV					-		
529(a)	30(a)		ovince, country, and ZIP or PA 15222-3		postal code		4530	000	
C Book value of all asset at end of year	s		nber (See instructions.)	<u> </u>					
	-		pe ► X 501(c) corp		501(c) trust) trust	Other trust	
		ation's unrelated trades or				e the only (or first) u		than and	
		SSIVE INVEST	ous sentence, complete Par		If only on				
business, then com		· ·	ous sentence, complete rai	is i allu	n, complete a scheuu	ie ivi ioi eacii auditioi	iai iiaut	UI	
			affiliated group or a paren	t-subsidi	arv controlled group?	•	Ye	s X No	
		tifying number of the pare	i i		3 1				
		SCOTT MICHAE			Telep	hone number 🕨 (412	392-4813	
Part I Unre	lated Trac	de or Business In	come		(A) Income	(B) Expense	S	(C) Net	
1a Gross receipts of			┥						
b Less returns an			」 c Balance ▶	1c					
2 Cost of goods s3 Gross profit. Su		e A, line 7)		3					
· ·		ch Schedule D)		4a	343,286			343,286.	
		Part II, line 17) (attach For		4b	0 - 0 , - 0 0			0 20 / 2001	
		sts		4c					
		ship or an S corporation (5	72,245	STMT	1	72,245.	
6 Rent income (S				6					
		me (Schedule E)		7					
•		and rents from a controlled	, , , , , , , , , , , , , , , , , , ,	8					
			organization (Schedule G)	9					
		ome (Schedule I)		10 11					
		e J) ns; attach schedule)		12					
					415,531			415,531.	
			re (See instructions for				ı.		
(Deduc	tions must b	oe directly connected v	vith the unrelated busine	ess inco	me.)				
14 Compensation	of officers, di	rectors, and trustees (Sch	nedule K)				14		
							15	5,821.	
							16		
							17		
							18	2,414.	
20 Depreciation (a	attach Form 4	 562)			20		19	2,414.	
			re on return				21b		
							22		
							23		
24 Employee bene	efit programs						24		
							25		
26 Excess readers	ship costs (Sc	hedule J)			CEE CES	шемеме о	26	100 406	
							27	190,406. 198,641.	
			ng loss deduction. Subtract				28	216,890.	
			eginning on or after Januar				29	210,000	
	-		egiiiiiig on or aiter bandar				30	0.	
			om line 29				31	216,890.	

Part	·	Total Unrelated Business Taxable Income		, 0,00		r age L
				72	7,0	65
32		unrelated business taxable income computed from all unrelated trades or businesses (see instructions)			7,0	<u> </u>
33		s paid for disallowed fringes		+		
34		le contributions (see instructions for limitation rules)		1 22	7 0	0.
35		related business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33			7,0	
36		on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 3		22	7,0	<u>65.</u>
37	Total of	unrelated business taxable income before specific deduction. Subtract line 36 from line 35				
38	Specific	deduction (Generally \$1,000, but see line 38 instructions for exceptions)	. 38		1,0	<u>00.</u>
39	Unrelate	ed business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,				
		e smaller of zero or line 37	39			0.
Part	IV 7	ax Computation				
40	Organiz	ations Taxable as Corporations. Multiply line 39 by 21% (0.21)	► 40			0.
41		axable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:				
	Ta	x rate schedule or Schedule D (Form 1041)	▶ 41			
42	Proxy ta	x. See instructions	▶ 42			
43	Alternati	ve minimum tax (trusts only)	43			
44	Tax on I	Noncompliant Facility Income. See instructions	44			
45	Total. A	dd lines 42, 43, and 44 to line 40 or 41, whichever applies	45			0.
Part		ax and Payments				
		tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a				
		edits (see instructions)	\dashv			
C			\dashv			
_			\dashv			
		, , , , , , , , , , , , , , , , , , , ,	100			
		edits. Add lines 46a through 46d		+		0.
47	Subtrac	: line 46e from line 45				<u> </u>
48			' 			
49		x. Add lines 47 and 48 (see instructions)				0.
50		t 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	. 50			0.
		ts: A 2018 overpayment credited to 2019	_			
		timated tax payments 51b	_			
C	Tax dep	osited with Form 8868 51c	_			
d	Foreign	organizations: Tax paid or withheld at source (see instructions)	_			
		withholding (see instructions) 51e	_			
f	Credit fo	or small employer health insurance premiums (attach Form 8941)	_			
g	Other cr	edits, adjustments, and payments: Form 2439				
	Fo	rm 4136 Other Total > 51g				
52	Total pa	yments. Add lines 51a through 51g	52			
53		ed tax penalty (see instructions). Check if Form 2220 is attached 🕨 🔲	53			
54	Tax due	. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54			
55	Overpay	ment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	▶ 55			
56		e amount of line 55 you want: Credited to 2020 estimated tax	▶ 56			
Part	VI S	Statements Regarding Certain Activities and Other Information (see instructions)		•		
57	At any ti	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority			Yes	No
		nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file				
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country				
		>				х
58		he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?				X
30	•	see instructions for other forms the organization may have to file.				
59	,	e amount of tax-exempt interest received or accrued during the tax year > \$				
		der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known	wledge and	belief, it is tru	e.	
Sign		rect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			,	
Here		VP FINANCE & CFO	-	RS discuss this		vith
		Signature of officer Date VP FINANCE & CFO Title	instructio	ns)? X Y	`	¬ No
					υ δ	No
		Print/Type preparer's name Preparer's signature Date Check		ΓIN		
Paid	l	Self- employs		200241	205	
Prep	oarer	SUSAN M. KIRSCH SUSAN M. KIRSCH SUSAN M. KIRSCH		200341		
Use	Only	Firm's name ► SCHNEIDER DOWNS & CO., INC. Firm's EIN	<u> </u>	25-140	870	<u>ა</u>
		ONE PPG PLACE, SUITE 1700	44.0	064 -	<i></i>	
		Firm's address ► PITTSBURGH, PA 15222 Phone no.	412-	<u>-261-3</u>	644	

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Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory v	aluation > N/A					_
1 Inventory at beginning of year				Inventory at end of year			6		
2 Purchases				Cost of goods sold. Su					
3 Cost of labor				from line 5. Enter here	and in I	Part I,			
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		Yes N	lo
b Other costs (attach schedule)				property produced or a	cquirec	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	l Per	sonal Property L	ease	d With Real Prope	rty)		
Description of property									
(1)									_
(2)									_
(3)									_
(4)									_
	2. Rent receiv	ed or accrued							
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	e than	of rent for p	personal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly or columns 2(a) and	onnected with the inc 2(b) (attach schedule	ome in	
(1)									_
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	▶			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•	0).
Schedule E - Unrelated Del	ot-Financed	Income (see	instru	ctions)		•			
			2	. Gross income from or allocable to debt-	, ,	3. Deductions directly conne to debt-financed	d property		
1. Description of debt-fi	inanced property			financed property	(a)	Straight line depreciation (attach schedule)	(b) Other ded (attach sch		
(1)									_
(2)									_
(3)									_
(4)									_
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property h schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable of (column 6 x total 3(a) and	l of column	
(1)			1	%					_
(2)				%					_
(3)				%					_
(4)				%					_
	•			70		Enter here and on page 1, Part I, line 7, column (A).	Enter here and o		
Totals						0.		0) .
Total dividende-received deductions							 		÷

Form **990-T** (2019)

Schedule F - Interest	, Annuitie	s, Royal	ties, an	1				tions	see ins	struction	ns)
				Exempt (Controlled O	rganizatio	ons				
Name of controlled organi	zation	2. Em identifi num	cation	3. Net unr (loss) (see	elated income instructions)	4. Tota payn	al of specified nents made	includ	t of column 4 ded in the contration's gross i	rolling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Orga	nizations	•									
7. Taxable Income		unrelated incom see instructions		9. Total	of specified payr made	ments	10. Part of colu in the controlli gross		nization's	11 . De wit	eductions directly connected h income in column 10
(1)											
(2)											
(3)											
(4)											
	•						Add colun Enter here and line 8, o		1, Part I,		dd columns 6 and 11. here and on page 1, Part I, line 8, column (B).
Totals						▶			0.		0.
Schedule G - Investm		me of a S	Section	501(c)(7	'), (9), or (17) Org	anization				
(see in	structions)				1				1		
1. De	escription of inco	ome			2. Amount of	income	 Deduction directly connected (attach sched) 	ected	4. Set- (attach s	asides schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2)											
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B).
						_					
Totals				<u></u>		0.					0.
Schedule I - Exploited (see ins	d Exempt tructions)	Activity	Income	e, Other	Than Adv	/ertisin	g Income				
1. Description of exploited activity	unrelated incom	Gross d business ne from business	directly of with pro of uni	penses connected oduction related s income	4. Net incon from unrelated business (co minus colum gain, comput through	trade or blumn 2 n 3). If a e cols. 5	5. Gross inco from activity is not unrelate business inco	that ted	6. Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(1) (2) (3) (4)											
(3)											
(4)											
	page 1	ere and on 1, Part I, , col. (A).	page 1	re and on I, Part I, col. (B).							Enter here and on page 1, Part II, line 25.
Totals	>	0.		0.							0.
Schedule J - Advertis											
Part I Income From	n Periodio	cals Repo	orted o	n a Cons	solidated	Basis					
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, compute nrough 7.	5. Circula income		6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) (2) (3) (4)											-
(3)			_								-
(4)			-								-
(7)			-				1				
Totals (carry to Part II, line (5))	>	().	0	•						0.
											Form 990-T (2019)

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	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 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	0.

Form **990-T** (2019)

PARTMERSHIP 1 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 2 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 3 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 4 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 5 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 6 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 7 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 9 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 11 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 12 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 12 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 13 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 14 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 17 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 11 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 12 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 14 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 17 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 20 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 21 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 22 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 23 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 24 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 25 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 26 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 27 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 28 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTMERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PART	FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
PARTNERSHIP 2 - ORDINARY BUSINESS INCOME (LOSS)	DESCRIPTION	
PARTNERSHIP 4 - ORDINARY BUSINESS INCOME (LOSS) -24,805 PARTNERSHIP 5 - ORDINARY BUSINESS INCOME (LOSS) -24,805 PARTNERSHIP 6 - ORDINARY BUSINESS INCOME (LOSS) -81 PARTNERSHIP 7 - ORDINARY BUSINESS INCOME (LOSS) -81 PARTNERSHIP 9 - ORDINARY BUSINESS INCOME (LOSS) -3,435 PARTNERSHIP 9 - ORDINARY BUSINESS INCOME (LOSS) -3,435 PARTNERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) -24 PARTNERSHIP 11 - ORDINARY BUSINESS INCOME (LOSS) -24 PARTNERSHIP 12 - ORDINARY BUSINESS INCOME (LOSS) -24 PARTNERSHIP 13 - ORDINARY BUSINESS INCOME (LOSS) -24 PARTNERSHIP 14 - ORDINARY BUSINESS INCOME (LOSS) -3,636 PARTNERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) -2,755 PARTNERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) -5,744 PARTNERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) -2,755 PARTNERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) -4,377 PARTNERSHIP 17 - ORDINARY BUSINESS INCOME (LOSS) -4,377 PARTNERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) -4,377 PARTNERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 20 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 21 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 22 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 23 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 24 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 25 - ORDINARY BUSINESS INCOME (LOSS) -14 PARTNERSHIP 26 - ORDINARY BUSINESS INCOME (LOSS) -14,555 PARTNERSHIP 27 - ORDINARY BUSINESS INCOME (LOSS) -14,555 PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) -14,555 PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) -14,555 PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) -14,555 PARTNERSHIP	PARTNERSHIP 1 - ORDINARY BUSINESS INCOME (LOSS)	45,984.
PARTNERSHIP 4 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 5 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 6 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 7 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 9 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 11 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 12 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 13 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 14 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 17 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 17 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 20 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 21 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 22 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 22 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 24 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 25 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 26 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 27 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 28 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 33 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 34 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 35 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 36 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 37 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 38 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 39 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 30 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 30 - ORDINARY BUSINESS INCOME	PARTNERSHIP 2 - ORDINARY BUSINESS INCOME (LOSS)	523.
PARTNERSHIP 5 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 7 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 7 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 9 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 11 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 11 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 12 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 13 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 14 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 15 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 16 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 17 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 18 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 19 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 10 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 20 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 21 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 21 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 22 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 23 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 24 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 25 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 26 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 27 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 28 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 33 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 34 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 35 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 36 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 37 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 38 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 39 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 39 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 31 - ORDINARY BUSINESS INCOME	PARTNERSHIP 3 - ORDINARY BUSINESS INCOME (LOSS)	-24,837.
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PARTNERSHIP 22 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 26 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 28 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5		
PARTNERSHIP 26 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 28 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) FOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5 FORM 990-T OTHER DEDUCTIONS STATEMENT 2 DESCRIPTION INVESTMENT ADVISORY FEES ACCOUNTING FEES ACCOUNTING FEES INTANGIBLE DRILLING COSTS 27 27 27 27 27 28 28 386 310,686		
PARTNERSHIP 28 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5 FORM 990-T OTHER DEDUCTIONS STATEMENT 2 DESCRIPTION INVESTMENT ADVISORY FEES ACCOUNTING FEES INTANGIBLE DRILLING COSTS -14,557 -889 -889 -889 -889 -889 -889 -889 -88		27.
PARTNERSHIP 31 - ORDINARY BUSINESS INCOME (LOSS) PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) FOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5 FORM 990-T OTHER DEDUCTIONS STATEMENT 2 DESCRIPTION INVESTMENT ADVISORY FEES ACCOUNTING FEES ACCOUNTING FEES INTANGIBLE DRILLING COSTS 110,688		
PARTNERSHIP 32 - ORDINARY BUSINESS INCOME (LOSS) TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5 FORM 990-T OTHER DEDUCTIONS STATEMENT 2 DESCRIPTION INVESTMENT ADVISORY FEES ACCOUNTING FEES ACCOUNTING FEES INTANGIBLE DRILLING COSTS - 6 72,245 AMOUNT AMOUNT 110,688		-889
FORM 990-T OTHER DEDUCTIONS STATEMENT 2 DESCRIPTION INVESTMENT ADVISORY FEES ACCOUNTING FEES INTANGIBLE DRILLING COSTS OTHER DEDUCTIONS AMOUNT 28,386 110,688		-6 .
DESCRIPTION AMOUNT INVESTMENT ADVISORY FEES ACCOUNTING FEES INTANGIBLE DRILLING COSTS AMOUNT 51,338 28,380 110,688	TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	72,245.
INVESTMENT ADVISORY FEES 51,338 ACCOUNTING FEES 28,380 INTANGIBLE DRILLING COSTS 110,688	FORM 990-T OTHER DEDUCTIONS	STATEMENT 2
ACCOUNTING FEES 28,380 INTANGIBLE DRILLING COSTS 110,688	DESCRIPTION	AMOUNT
ACCOUNTING FEES 28,380 INTANGIBLE DRILLING COSTS 110,688	TANZECOMENO ADVICODY EFEC	E1 220
INTANGIBLE DRILLING COSTS 110,688		
	THIANGIBLE DEIDLING COSID	110,000
IOIAD IO PORM 330-1, PAGE I, DINE 4/ 1907, 400	TOTAL TO FORM 990-T, PAGE 1, LINE 27	190,406.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
08/31/01	205,531.	205,531.	0.	0.
08/31/02	7,228.	7,228.	0.	0.
08/31/03	42,602.	42,602.	0.	0.
08/31/04	208,688.	208,688.	0.	0.
08/31/05	18,008.	10,713.	7,295.	7,295.
08/31/07	120,642.	10,154.	110,488.	110,488.
08/31/08	81,446.	0.	81,446.	81,446.
08/31/09	408,549.	0.	408,549.	408,549.
08/31/10	643,600.	0.	643,600.	643,600.
08/31/11	390,288.	0.	390,288.	390,288.
08/31/12	208,615.	0.	208,615.	208,615.
08/31/13	162,213.	0.	162,213.	162,213.
08/31/16	39,271.	0.	39,271.	39,271.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	2,051,765.	2,051,765.

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMP No. 1545 004

ENTITY

OMB No. 1545-0047

50

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning $\underline{SEP~1,~2019}~, \text{ and ending}~\underline{AUG~31,~2020}$

► Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for 501(c)(3) Organizations Only

Interna	Do not enter SSN numbers on this form as it	may be	made public if your organiza	ation is a 501(c)(3).	501(c)(3) Organizations Only
Name	of the organization PITTSBURGH SYMPHONY INC	•		Employer identificat	
	Inrelated Business Activity Code (see instructions)	0		•	
	escribe the unrelated trade or business PROGRAM A	DVER	TISING		
	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (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			
11	Advertising income (Schedule J)	11	90,694.	80,519.	10,175.
12	Other income (See instructions; attach schedule)	12	·		
13	Total. Combine lines 3 through 12	13	90,694.	80,519.	10,175.
	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in	come.)		ons must be
14	Compensation of officers, directors, and trustees (Schedule K)			I	
15	Salaries and wages			I	
16	Repairs and maintenance				
17	Bad debts				
18	Interest (attach schedule) (see instructions)				
19	Taxes and licenses			19	
20	Depreciation (attach Form 4562)			046	
21	Less depreciation claimed on Schedule A and elsewhere on return		[Zia]	21b 22	
22	Depletion Contributions to deferred componentian plans				
23	Contributions to deferred compensation plans				
24 25	Employee benefit programs				
25 26	Excess exempt expenses (Schedule I)				
20 27	Excess readership costs (Schedule J) Other deductions (attach schedule)				
28	Other deductions (attach schedule) Total deductions. Add lines 14 through 27				0.
29	Unrelated business taxable income before net operating loss deductions.				10,175.
30	Deduction for net operating loss arising in tax years beginning on o			3 29	
00	instructions)		•	30	n.
31	Unrelated business taxable income. Subtract line 30 from line 29				10,175.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

PITTSBURGH SYMPHONY INC.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	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 minus column 5, but not more than column 4).
(1) PROGRAM BOOKS	90,694.	80,519.				
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	90,694.	80,519.	10,175.			0.
Part II Income From Perio				ch periodical liste	d in Part II, fill in	1
columns 2 through 7 on a	a line-by-line basis.))				
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	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 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	90,694.	80,519.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	90,694.	80,519.				0.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-RIC, 1120-SF, or certain Forms 990-T.
■ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Name

Employer identification number

PITTSBURGH SYMPHON	INC.		25	5-0986052			
Did the corporation dispose of any investmer	nt(s) in a qualified opportunit	y fund during the tax year		.			
If "Yes," attach Form 8949 and see its instruc	ctions for additional requirer	nents for reporting your ga					
Part I Short-Term Capital Gai	ns and Losses (See ir	nstructions.)					
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(d) Proceeds (sales price) (e) Cost Cost or loss from Form(s) 8949, Part I, line 2, column (g)					
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b							
1b Totals for all transactions reported on							
Form(s) 8949 with Box A checked							
2 Totals for all transactions reported on							
Form(s) 8949 with Box B checked	3,188.	165.		3,023.			
3 Totals for all transactions reported on							
Form(s) 8949 with Box C checked							
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 37			4			
5 Short-term capital gain or (loss) from like-kind				5			
6 Unused capital loss carryover (attach computa				6 (
7 Net short-term capital gain or (loss). Combine				3,023.			
Part II Long-Term Capital Gain	ns and Losses (See in	structions.)					
See instructions for how to figure the amounts	(4)	(a)	(a) A di cotto contra ta conic	(h) Online ou (leans) Outstand			
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(ħ) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)			
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b							
8b Totals for all transactions reported on							
Form(s) 8949 with Box D checked							
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	85,970.	5,221.		80,749.			
10 Totals for all transactions reported on							
Form(s) 8949 with Box F checked							
11 Enter gain from Form 4797, line 7 or 9			1	1 259,514.			
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 37		1	2			
13 Long-term capital gain or (loss) from like-kind				3			
14 Capital gain distributions			1	4			
15 Net long-term capital gain or (loss). Combine				340,263.			
Part III Summary of Parts I and	H						
16 Enter excess of net short-term capital gain (lir	e 7) over net long-term capital	loss (line 15)	1	3,023.			
17 Net capital gain. Enter excess of net long-term				7 340,263.			
18 Add lines 16 and 17. Enter here and on Form				8 343,286.			
Note: If losses exceed gains, see Capital Los							
LHA For Paperwork Reduction Act Notice,		120.		Schedule D (Form 1120) 2019			

921051 12-16-19

Form

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No. 1545-0074

Social security number or taxpayer identification no.

25-0986052

PITTSBURGH SYMPHONY INC.

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term Part I transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or

codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (d) (h) (a) (c) (e) loss. If you enter an amount Proceeds Description of property Date acquired Date sold or Cost or other Gain or (loss). in column (g), enter a code in (sales price) Subtract column (e) basis. See the (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo., day, yr.) (g) Amount of see Column (e) ir combine the result Code(s) with column (g) the instructions adjustment PARTNERSHIP 132. 132. VARIOUS VARIOUS PARTNERSHIP 6 VARIOUS VARIOUS 1. <1.> 9 1. PARTNERSHIP VARIOUS VARIOUS <1.> 467. 467. PARTNERSHIP 11 VARIOUS VARIOUS 12 375. 375. PARTNERSHIP VARIOUS VARIOUS 873. 14 873. PARTNERSHIP VARIOUS VARIOUS PARTNERSHIP 16 VARIOUS VARIOUS 1. 1. 1. PARTNERSHIP 17 VARIOUS VARIOUS 1. 21 PARTNERSHIP VARIOUS VARIOUS 480. 480. 859. 859. VARIOUS VARIOUS PARTNERSHIP VARIOUS 7 VARIOUS 113. <113.> PARTNERSHIP PARTNERSHIP VARIOUS VARIOUS 50. <50.> 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2019)

3,023.

3,188.

above is checked), or line 3 (if Box C above is checked)

165.

Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

PITTSBURGH SYMPHONY INC.

25-0986052

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or

codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

X (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the	loss. If you	t, if any, to gain or ou enter an amount (g), enter a code in . See instructions.	(h) Gain or (loss). Subtract column (e)
		(Mo., day, yr.)		Note below and see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	from column (d) & combine the result with column (g)
PARTNERSHIP 1	VARIOUS	VARIOUS	24,076.			-	24,076.
PARTNERSHIP 2	VARIOUS	VARIOUS		1,148.			<1,148.
PARTNERSHIP 3	VARIOUS	VARIOUS	581.				581.
PARTNERSHIP 4		VARIOUS	43.				43.
PARTNERSHIP 7	VARIOUS	VARIOUS	333.				333.
PARTNERSHIP 9	VARIOUS	VARIOUS	3,650.				3,650.
PARTNERSHIP 9	VARIOUS	VARIOUS	44.				44.
PARTNERSHIP 13	VARIOUS	VARIOUS	2,623.				2,623.
PARTNERSHIP 17	VARIOUS	VARIOUS	36,305.				36,305.
PARTNERSHIP 21	VARIOUS	VARIOUS	4,569.				4,569.
PARTNERSHIP 31	VARIOUS	VARIOUS	13,731.				13,731.
PARTNERSHIP 26	VARIOUS	VARIOUS	15.				15.
PARTNERSHIP 11	VARIOUS	VARIOUS		89.			<89.
PARTNERSHIP 12	VARIOUS	VARIOUS		262.			<262.
PARTNERSHIP 14	VARIOUS	VARIOUS		181.			<181.
PARTNERSHIP 16	VARIOUS	VARIOUS		1,592.			<1,592.
PARTNERSHIP 22	VARIOUS	VARIOUS		1,949.			<1,949.
2 Totals. Add the amounts in colu	ımns (d) (e) (d) a	nd (h) (subtract					
negative amounts). Enter each t Schedule D, line 8b (if Box D al above is checked), or line 10 (if	otal here and incloove is checked),	ude on your line 9 (if Box E	85,970 .	5,221.			80,749.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2019)

16040427 786250 23428-24000

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) ► Attach to your tax return.

OMB No. 1545-0184

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Department of the Treasury ► Go to www.irs.gov/Form4797 for instructions and the latest information. Internal Revenue Service Name(s) shown on return PITTSBURGH SYMPHONY INC. 25-0986052 1 Enter the gross proceeds from sales or exchanges reported to you for 2019 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) (a) Description (b) Date acquired (d) Gross sales (c) Date sold 2 allowed or basis, plus of property Subtract (f) from the (mo., day, yr.) (mo., day, yr.) allowable since improvements and sum of (d) and (e) acquisition expense of sale SEE STATEMENT 4 234,882. 5,639. 229,243. Gain, if any, from Form 4684, line 39 3 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 30,271 Gain, if any, from line 32, from other than casualty or theft 6 6 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 259,514 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

259,514. capital gain on the Schedule D filed with your return. See instructions Ordinary Gains and Losses (see instructions) Part II 10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term

11	Loss, if any, from line 7							11	()
12	Gain, if any, from line 7 or amount from							12		
13	Gain, if any, from line 31							13		
14	Net gain or (loss) from Form 4684, lin	nes 31 and 38a						14		
15							15			
16							16			
17							17			
18	For all except individual returns, ente									
	a and b below. For individual returns	, complete lines	a and b below	<i>1</i> .						
а	a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the									
	loss from income-producing property on Schedule A (Form 1040 or Form 1040-SR), line 16. (Do not include any loss									
	on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions						18a			
b	Redetermine the gain or (loss) on line	e 17 excluding th	ne loss, if any,	on line 18a. Ente	r here and	on Schedu	le 1			
	(Form 1040 or Form 1040-SR), Part I	, line 4						18b		

LHA For Paperwork Reduction Act Notice, see separate instructions.

Nonrecaptured net section 1231 losses from prior years. See instructions

Form **4797** (2019)

8

Part III Gain From Disposition of Propert	y Und	er Sections 1245	5, 1250, 1252	2, 125	54, and 1255	(see	instructions)
19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:						ired)	(c) Date sold (mo., day, yr.)
A PARTNERSHIP 3							VARIOUS
B PARTNERSHIP 4							VARIOUS
c PARTNERSHIP 17							VARIOUS
D PARTNERSHIP 22					VARIOUS		VARIOUS
These columns relate to the properties on							
lines 19A through 19D.	▶	Property A	Property		Property		Property D
20 Gross sales price (Note: See line 1 before completing.)	20	19,198.	10,9	<u>34.</u>	1	31.	8.
21 Cost or other basis plus expense of sale	21						
22 Depreciation (or depletion) allowed or allowable	22						
23 Adjusted basis. Subtract line 22 from line 21	23	10 100	10 0	2.4	1	2.4	•
24 Total gain. Subtract line 23 from line 20	24	19,198.	10,9	34.	<u> </u>	31.	8.
25 If section 1245 property:							
a Depreciation allowed or allowable from line 22	25a						
b Enter the smaller of line 24 or 25a	25b						
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
a Additional depreciation after 1975. See instructions	26a						
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
a Soil, water, and land clearing expenses	27a						
b Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
28 If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b Enter the smaller of line 24 or 28a	28b						
 29 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions 	29a						
b Enter the smaller of line 24 or 29a. See instructions	29b						
Summary of Part III Gains. Complete property of	olumno	A through D through	lina 20h hafara	aoina	to line 20		
Complete property of	Joiuitiis	A tillough b tillough	iiile 230 belole (gonig	to line 30.		
30 Total gains for all properties. Add property columns	A throu	gh D, line 24				30	30,271.
31 Add property columns A through D, lines 25b, 26g,	27c, 28	b, and 29b. Enter here	e and on line 13			31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion							
from other than casualty or theft on Form 4797, line	6					32	30,271.
Part IV Recapture Amounts Under Section	ns 179	9 and 280F(b)(2) \	When Busine	ess l	Use Drops to	50%	or Less
(see instructions)					(a) Section	n	(b) Section 280F(b)(2)
22 Section 170 expense deduction or depreciation alle			\ - /\ - /				
 33 Section 179 expense deduction or depreciation allowable in prior years 34 Recomputed depreciation. See instructions 34 							
Hecomputed depreciation. See instructions Recapture amount. Subtract line 34 from line 33. See the instructions for where to report							

23428-21

FORM 4797 PROPERTY HEI			LD MORE THAN	ONE YEAR	STATEMENT 4		
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS	
PARTNERSHIP 2	VARIOUS	VARIOUS			4,455.	-4,455.	
PARTNERSHIP 3	VARIOUS	VARIOUS	181,239.		-	181,239.	
PARTNERSHIP 4	VARIOUS	VARIOUS	37,173.			37,173.	
PARTNERSHIP 7	VARIOUS	VARIOUS	7.			7.	
PARTNERSHIP 11	VARIOUS	VARIOUS			844.	-844.	
PARTNERSHIP 12	VARIOUS	VARIOUS	350.			350.	
PARTNERSHIP 13	VARIOUS	VARIOUS			340.	-340.	
PARTNERSHIP 14	VARIOUS	VARIOUS	13,686.			13,686.	
PARTNERSHIP 15	VARIOUS	VARIOUS	2,121.			2,121.	
PARTNERSHIP 16	VARIOUS	VARIOUS	30.			30.	
PARTNERSHIP 17	VARIOUS	VARIOUS	3.			3.	
PARTNERSHIP 22	VARIOUS	VARIOUS	82.			82.	
PARTNERSHIP 31	VARIOUS	VARIOUS	188.			188.	
PARTNERSHIP 28	VARIOUS	VARIOUS	3.			3.	
TOTAL TO 4797, PART I, LINE 2			234,882.		5,639.	229,243.	