Return of Organization Exempt From Income Tax

Form **990**

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

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

► Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2023

Open to Public Inspection

Form **990** (2023)

A For the 2023 calendar year, or tax year beginning and ending 07/01/2023 06/30/2024 D Employer identification number C Name of organization B Check if applicable: PRINCETON SYMPHONY ORCHESTRA, INC 22-2327766 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Name change PO BOX 250 (609)497-0020Initial return City or town, state or province, country, and ZIP or foreign postal code Amended 3,035,285 PRINCETON, NJ 08542 G Gross receipts \$ return Application pending F Name and address of principal officer: H(a) Is this a group return for MARC UYS Yes Χ Nο subordinates' PO BOX 250, PRINCETON, NJ 08542 Yes No H(b) Are all subordinates included? Tax-exempt status: 4947(a)(1) or If "No," attach a list. (see instructions) X 501(c)(3) 501(c) (Website: WWW.PRINCETONSYMPHONY.ORG H(c) Group exemption number Form of organization: X Corporation Other > L Year of formation: 1980 M State of legal domicile: NiT Summary 1 Briefly describe the organization's mission or most significant activities: CREATE OPPORTUNITIES FOR PEOPLE IN THE GREATER PRINCETON AREA TO EXPERIENCE EXCELLENT, INNOVATIVE LIVE MUSIC Governance IN MANY FORMS AND VENUES, ENCOURAGING THEM TO ENGAGE IN THE ART FORM. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 2.2 Activities & Number of independent voting members of the governing body (Part VI, line 1b) 22 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 312 Total number of volunteers (estimate if necessary) 80 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 17,150 **b** Net unrelated business taxable income from Form 990-T, line 34 6,291 **Current Year** Contributions and grants (Part VIII, line 1h) 1,694,882. 2,140,280 **COPY FOR** Program service revenue (Part VIII, line 2g) 906,847 834,763. PUBLIC INSPECTION Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 113,430 334,475. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -16,48475,948. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,144,073. 2,940,068. 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) NONE Benefits paid to or for members (Part IX, column (A), line 4) 14 NONE NONE Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 1,860,773 2,003,385. 16a Professional fundraising fees (Part IX, column (A), line 11e) NONE NONE **b** Total fundraising expenses (Part IX, column (D), line 25) ▶ _____267,300. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,988,161 1,754,582. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 3,848,934 3,757,967. -704,861 Revenue less expenses. Subtract line 18 from line 12 -817,899. s or **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 10,110,371 10,508,299. 21 Total liabilities (Part X, line 26) 405,578 1,154,285. 22 Net assets or fund balances. Subtract line 21 from line 20. 9,704,793 9,354,014. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here Type or print name and title Print/Type preparer's name PTIN Preparer's signature Date Check Paid self-employed BRAD CARUSO BRAD CARUSO 11/12/2024 P01249134 Preparer Firm's name ► WITHUM SMITH + BROWN PC 22-2027092 Firm's FIN **Use Only** 609-520-1188 506 CARNEGIE CENTER STE 400 PRINCETON, NJ 08540-6243 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

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Pa	art III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly d	escribe the organization's mission:
	-	MISSION OF THE PRINCETON SYMPHONY ORCHESTRA IS TO LEVERAGE THE
		R OF LIVE MUSIC TO UPLIFT THE HUMAN EXPERIENCE.
2		organization undertake any significant program services during the year which were not listed on the
	If "Yes,"	rm 990 or 990-EZ? Yes X No describe these new services on Schedule O.
3	services	organization cease conducting, or make significant changes in how it conducts, any program ?
	Describe expense	the triese trianges on scriedule 0. the the organization's program service accomplishments for each of its three largest program services, as measured by the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,260,303 including grants of \$) (Revenue \$466,613)
		DRMING CLASSICAL MASTERWORKS - A FULL SEASON OF 7 PAIRS OF
		ERTS WAS PRESENTED AT RICHARDSON AUDITORIUM. A TOTAL AUDIENCE 926 WAS REACHED. 11 CHAMBER MUSIC CONCERTS WERE PRESENTED TO
		TAL OF 1,055 PEOPLE. (SEE SCHEDULE O)
4b	(Code:	
	THE I	PRINCETON FESTIVAL WAS ONCE AGAIN PRESENTED UNDER A LARGE
		000SQF) CLEARSPAN TENT ON THE GROUNDS OF MORVEN MUSEUM &
		EN. IN TOTAL, 11 PERFORMANCES IN THE TENT AND 2 PERFORMANCES
		RINITY CHURCH ACROSS THE ROAD AS WELL AS ACCOMPANYING
		ATIONAL LECTURES AND ANCILLARY EVENTS. PERFORMANCES INCLUDED A
		STAGED PRODUCTION OF MOZART'S COSÌ FAN TUTTE, ORCHESTRAL
		, BAROQUE, CHAMBER, DANCE, AND BROADWAY. A TOTAL LIVE AUDIENCE
	OF 6	,500 WAS SERVED. (SEE SCHEDULE O)
4c	(Code:) (Expenses \$336,592 including grants of \$) (Revenue \$22,650)
	EDUC	ATION - ACTIVITIES INCLUDED 60 CLASSROOM VISITS, A "LISTEN-UP"
	WORKS	SHOP, AND 2 "SCHOOLDAY" CONCERTS. PSO'S PARTNERSHIP WITH YOCJ
		INUED, WITH IN-PERSON REHEARSALS WITH PSO'S ASSISTANT
		JCTOR. PSO MUSICIANS RAN SECTIONALS AND MASTERCLASSES.
		/ITIES WITH THE PRINCETON FESTIVAL INCLUDED AN INSTRUMENT
		ING ZOO AND A FAMILY POPS CONCERT TOTAL LIVE AUDIENCE: 8,231.
	(SEE	SCHEDULE O)
4d	•	rogram services (Describe on Schedule O.)
4-	(Expens	es \$ including grants of \$) (Revenue \$)

3,075,128.

4e Total program service expenses

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3E1020 2.000 Form **990** (2023) V23-7.6F 006647

Form 990 (2023)

Part IV Checklist of Required Schedules

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	37	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	37	
L	Schedule D, Parts XI and XII	12a	Х	
D	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		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	u		- 22
	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	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
-	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

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Form 990 (2023)
Part IV Chocklist of Poquired Schodules (continued)

Part	Checklist of Required Schedules (continued)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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	Х	
24 a	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		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		21
		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26		v
0.7		20		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X	21
		23	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
55	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37		27		37
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
_	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1 a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 145			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b NONE			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
	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 312			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule</i> O	3b	Х	
	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		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
	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	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	_		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
•	sponsoring organization have excess business holdings at any time during the year?	-		
9 a	Sponsoring organizations maintaining donor advised funds. Did the engagering organization make any tayable distributions under section 40662	9a		
	Did the sponsoring organization make any taxable distributions under section 4966?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	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.)			
12 a	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			
	Enter the amount of reserves on hand	140		v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
15	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.	13		21
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes." complete Form 6069.			

Part VI

22-2327766 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response of note to any line in this Part vi				X
Sect	ion A. Governing Body and Management			V	NI-
		ı		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	22	-		
b	Enter the number of voting members included on line 1a, above, who are independent 1b	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	ship with			
_	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under t				
•	supervision of officers, directors, trustees, or key employees to a management company or other person		3		Х
4			4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.		5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets		6		
6	Did the organization have members or stockholders?		-		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect o		_		
	one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) r				
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertake	en during			
	the year by the following:				
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-				
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X
Secti	ion 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 purpose	es?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing th	e form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that c				
	rise to conflicts?		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy?				
	describe on Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and ap				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and	•			
а	The organization's CEO, Executive Director, or top management official		15a	Х	
a b	Other officers or key employees of the organization		15b	Х	
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	ingement			
·ou	with a taxable entity during the year?	•	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev				
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	organization's exempt status with respect to such arrangements?		16b		
Secti	ion C. Disclosure		•		
17	List the states with which a copy of this Form 990 is required to be filed NJ,				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-1	Γ (sec	tion 5	01(c)
-	(3)s only) available for <u>public</u> inspection. Indicate <u>how</u> you made these available. Check all that apply.		,,,,,		(3)
	X Own website Another's website X Upon request Other (explain on Schedul	e O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents.	conflict o	f inte	rest n	olicv
-	and financial statements available to the public during the tax year.			۳	,
20	State the name, address, and telephone number of the person who possesses the organization's books	and record	s.		
	MARC UYS 1000 HERRONTOWN ROAD PRINCETON, NJ 08540		-		

609-497-0020

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not ch unles	eck s pe	ition more erson	e than construction is both construction. Highest compensated	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
						ă.				
(1) MARC UYS	40.00									
EXECUTIVE DIRECTOR	NONE			Χ				177,979.	NONE	11,762.
(2) ROSSEN MILANOV	15.00									
MUSIC DIRECTOR	NONE					X		137,500.	NONE	NONE
(3) STEPHANIE WEDEKING	10.00									
CHAIR	NONE	X		Χ				NONE	NONE	NONE
(4) ANNE VANLENT	4.00									
VICE CHAIR	NONE	X		Χ				NONE	NONE	NONE
(5) MICHAEL MATHEWS	4.00									
TREASURER	NONE	X		Χ				NONE	NONE	NONE
(6) NORA DUFFY DECKER	4.00									
SECRETARY	NONE	X		Χ				NONE	NONE	NONE
(7) CAROL ANDERSON	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(8) MARCIA ATCHESON	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(9) DEREK BERMEL	1.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
(10) MARCIA BOSSART	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(11) LISA BROWNE	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(12) JULIAN GRANT	1.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
(13) GEORGE HARVEY	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(14) DEBORAH HERRINGTON	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and F	ligl	hest Compensat	ed Employees (c	ontinue	ed)	
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for	box,	unles	neck ss pe	erson	e than o is both or/truste	an	Reportable compensation from the	Reportable compensation from related organizations	an	stimated nount of other pensatio	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	frorg and	om the anization drelated	n d
15) B. SUE HOWARD	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
16) JAMES LINNEHAN	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
17) MARK NURSE	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
18) COSTA PAPASTEPHANOU	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
19) ELIZABETH PEPEK	1.00											
TRUSTEE	NONE	X						NONE	NONE]	NONE
20) PETE TAFT	1.00											
TRUSTEE	NONE	X						NONE	NONE]	NONE
21) BENEDIKT VON SCHRODER	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
22) BETH WALSH	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
23) LOUISE WELLEMEYER	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
24) PHILIP WEY	1.00											
TRUSTEE	NONE	Х						NONE	NONE]	NONE
1b Sub-total					_		\blacktriangleright	315,479.	NONE		11,	762.
c Total from continuation sheets to Part VII, S							\blacktriangleright	NONE	NONE]	NONE
d Total (add lines 1b and 1c)							>	315,479.	NONE		11,	762.
2 Total number of individuals (including but not reportable compensation from the organization		hose	liste	d al	bov	e) who	re	ceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3		X
4 For any individual listed on line 1a, is the organization and related organizations gr	sum of rep	oortab	ole c	om	per	satior	n ai	nd other compens	sation from the			
individual										4	Х	
5 Did any person listed on line 1a receive or	accrue co	mpen	satio	on f	fron	n any	un	related organizati	on or individual			
for services rendered to the organization? If "Y										5		Х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
STARLITE 9 WHITTENDALE DRIVE MOORESTOWN, NJ 08057	EVENT TECHNOLOGY	295,000.

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

Form	990 (2	023) PRINCETON S	SYMPHONY ORG	CHESTRA, INC.		22-23277	66 Page
Par	rt VIII	Statement of Revenue					
		Check if Schedule O contains a respor	nse or note to an	y line in this Part V	/		
		·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
S, S	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
	C	Fundraising events 1c	254,550.				
	d	Related organizations	201,000				
≣ ≣	e	Government grants (contributions) 1e	130,480.				
Sign	f	All other contributions, gifts, grants,	200,200				
ē, Ž	'	and similar amounts not included above . 1f	1,309,852.				
<u></u>		Noncash contributions included in	_,,,,,,,,,				
1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	g	lines 1a-1f 1g	\$ 112,639.				
a G	h	Total. Add lines 1a-1f	*	1,694,882.			
		Total. Add lines 1a-11	Business Code	1,031,002.			
ø		TICKET SALES	711130	757,663.	757,663.		
Program Service Revenue	2a	CONTRACTED PERFORMANCES	711130	52,250.	52,250.		
Se	b	PROGRAM BOOK	541800	24,850.	7,700.	17,150.	
E S	C .	TROOTER BOOK	311000	21,030.	7,700.	17,130.	
Regis	d						
5	e						
	f	All other program service revenue		834,763.			
	g	Total. Add lines 2a-2f		034,703.			
	3	Investment income (including dividends,	•	334,475.			334,475
	١.	other similar amounts)		NONE			334,473
	4 5	Income from investment of tax-exempt bond		NONE			
	"	Royalties	(ii) Personal	NOINE			
			(ii) i cidoridi				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c NONE	1				
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
ne	b	Less: cost or other basis					
/en		and sales expenses 7b					
Re	С	Gain or (loss)					
Other Revenue	d	Net gain or (loss)		NONE			
Ħ	8a	Gross income from fundraising					
O		events (not including \$254,550.					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	152,936.				
	b	Less: direct expenses 8b	92,738.				
	С	Net income or (loss) from fundraising events		60,198.			60,198
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses 9b	NONE				
	С	Net income or (loss) from gaming activities.		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	18,229.				
	b	Less: cost of goods sold	2,479.				
		Net income or (loss) from sales of inventory.		15,750.	15,750.		
<u>s</u>			Business Code				
e e	11a						
ane	b						
Miscellaneous Revenue	c						
S R	d	All other revenue					
Σ		Total. Add lines 11a-11d		NONE			
	_						

JSA 3E1051 2.000 2FK0JS F678

Form **990** (2023)

394,673.

17,150.

2,940,068.

833,363.

22-2327766

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	ponse or note to any line	in this Part IX		X
	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				
	and domestic governments. See Part IV, line 21	NONE			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	NONE			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	NONE			
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	245,063.	159,290.	49,013.	36,760
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE		07.500	
	Other salaries and wages	1,516,434.	1,312,713.	97,608.	106,113.
8	Pension plan accruals and contributions (include	NONE			
	section 401(k) and 403(b) employer contributions)				
9	. ,	85,930.	62,058.	11,580.	12,292
10	Payroll taxes	155,958.	132,471.	11,697.	11,790
	Fees for services (nonemployees):				
	Management	NONE		0 441	
	Legal	9,441.		9,441.	
	Accounting	33,710.		33,710.	
	Lobbying	NONE			
	Professional fundraising services. See Part IV, line 17.	NONE		40.642	
	Investment management fees	48,643.		48,643.	
g	Other. (If line 11g amount exceeds 10% of line 25, column	SEE SCHE O	460 014	16 024	
	(A), amount, list line 11g expenses on Schedule O.)	476,848.	460,014.	16,834.	
	Advertising and promotion	147,309.	147,309.	E6 E60	E E61
13	Office expenses	73,359. 51,792.	11,233. 21,885.	56,562. 20,139.	5,564 9,768
14	Information technology	NONE	21,003.	20,139.	9,100
15	Royalties	304,064.	276,451.	14,505.	13,108
	Occupancy	145,049.	96,440.	8,093.	40,516
	Travel	143,043.	70,440.	0,000.	40,510
10	Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
10	Conferences, conventions, and meetings	NONE			
	Interest	NONE			
	Payments to affiliates	NONE			
	Depreciation, depletion, and amortization	30,930.		30,930.	
	Insurance	47,515.	33,893.	6,784.	6,838
	Other expenses. Itemize expenses not covered	,,,,,	,	.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	PRODUCTION COSTS	385,922.	361,371.		24,551
b					•
С					
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	3,757,967.	3,075,128.	415,539.	267,300.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	Part X		X
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	46,344.	1	230,001.
	2	Savings and temporary cash investments	404,994.	2	710,418.
	3	Pledges and grants receivable, net	1,099,189.	3	676,061.
	4	Accounts receivable, net	8,125.	4	3,725.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).		6	NONE
ß	7	Notes and loans receivable, net		7	NONE
Assets	8	Inventories for sale or use			NONE
As	9	Prepaid expenses and deferred charges SEE SCHEDULE .O		9	28,976.
	_	Land, buildings, and equipment: cost or other	13,020.		20,5.00
		basis. Complete Part VI of Schedule D 10a 148 , 417			
	h	Less: accumulated depreciation		100	85,993.
	11	Investments - publicly traded securities			NONE
	12	Investments - other securities. See Part IV, line 11		12	8,203,406.
	13	Investments - program-related. See Part IV, line 11.			
	14			14	NONE 3,844.
	15	Intangible assets			
		Other assets. See Part IV, line 11			565,875.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	10,508,299.
	17	Accounts payable and accrued expenses		17	308,485.
	18	Grants payable			NONE
	19	Deferred revenue SEE SCHEDULE O		19	284,298.
	20	Tax-exempt bond liabilities			NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	NONE
Liabilities	22	Loans and other payables to any current or former officer, director,			
Ħ		trustee, key employee, creator or founder, substantial contributor, or 35%			
ja		controlled entity or family member of any of these persons			NONE
_	23	Secured mortgages and notes payable to unrelated third parties			NONE
	24	Unsecured notes and loans payable to unrelated third parties		24	NONE
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	561,502.
	26	Total liabilities. Add lines 17 through 25	405,578.	26	1,154,285.
Sec		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	1,760,576.	27	1,443,319.
ä	28	Net assets with donor restrictions		28	7,910,695.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ϋ́Α	32	Total net assets or fund balances		32	9,354,014.
Š	33	Total liabilities and net assets/fund balances		33	10,508,299.
_	00		10,110,3/1.	- 55	Form 990 (2023)

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01111 50	70 (2020)			1 6	.gc . =
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,	940,	<u>068</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,	757,	<u>967</u> .
3	Revenue less expenses. Subtract line 2 from line 1	3		817,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,	704,	<u>793</u> .
5	Net unrealized gains (losses) on investments	5		467,	120
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	9,	354,	014.
Part	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: CashX Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	cplain o	n		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		28	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled o	or		
	reviewed on a separate basis, consolidated basis, or both:	•			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		21	X	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audi				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersiaht a	of		
	the audit, review, or compilation of its financial statements and selection of an independent accounta	_		: X	
	If the organization changed either its oversight process or selection process during the tax year, e				
	Schedule O.		• •		
32	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in th	e		
va	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		_	a	Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		. —		
~	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	•	I	,	

SCHEDULE A (Form 990)

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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

empt charitable trust.	2023				
on.	Open to Public Inspection				
Employer identification number					

PR.	INCI	ETON SYMPHONY ORCHES						327766		
Pa	rt I	Reason for Public Ch	arity Status. (All	organizations must	comple	ete this p	oart.) See instruction	ns.		
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 throuç	gh 12, ch	eck only	one box.)			
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90).)				
3		A hospital or a cooperative	hospital service o	rganization described i	in sectio	n 170(b)	(1)(A)(iii).			
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)	(iii). Enter the		
		hospital's name, city, and st	tate:							
5		An organization operated t		a college or universit	y owned	d or ope	rated by a governme	ental unit described in		
		section 170(b)(1)(A)(iv). (C								
6	Щ	•	•	ment or governmental unit described in section 170(b)(1)(A)(v).						
7	X	An organization that norma	-	•	pport fro	om a go	vernmental unit or fro	om the general public		
_		described in section 170(b)			5					
8	\blacksquare	A community trust describe								
9		An agricultural research org	=			-		-		
		or university or a non-land-	grant college of ag	griculture (see instruct	ions). Ei	nter the i	name, city, and state o	t the college or		
40		university:	II				. ()			
10		An organization that norma receipts from activities rela support from gross investmacquired by the organization	ted to its exempt finent income and union after June 30, 1	unctions, subject to c nrelated business tax 975. See section 509 (ertain ex able inco (a)(2). (0	ceptions ome (less Complete	s; and (2) no more that s section 511 tax) from e Part III.)	n 331/3 % of its		
11 12	\vdash	An organization organized an organization organized a	•	•	•			ery out the numbers of		
12		one or more publicly suppo	•	•				• • •		
		the box on lines 12a throug	=			-				
_	Г	Type I. A supporting orga					· ·	_		
а	_	the supported organization	•	•	•		• , ,			
		supporting organization.	. , .	• • • •		ajority of	the directors of truste	es of the		
b	Г	Type II. A supporting org	-			with ite	supported organizati	on(s) by having		
D		control or management of	•				· · ·			
		organization(s). You must			tilo oaiii	о рогоог	io that control of that	ago ino supportou		
С		Type III functionally integ			ited in co	onnectio	n with, and functiona	lly integrated with.		
·		its supported organization						,g.a.a,		
d		Type III non-functionally		· ·				ted organization(s)		
		that is not functionally into			-					
		requirement (see instruct	-		-		•			
е		Check this box if the orga	anization received	a written determinatio	n from t	he IRS th	hat it is a Type I, Type	II, Type III		
		functionally integrated, or	Type III non-funct	ionally integrated sup	porting o	organizat	ion.			
f	En	ter the number of supported	l organizations							
g	Pro	ovide the following information	on about the suppo	orted organization(s).						
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	listed in yo	organization ur governing		(vi) Amount of other support (see		
				above (see instructions))	Yes	ment?	instructions)	instructions)		
					103	1.13				
(A)										
(B)										
(C)										
(D)										
(E)										
Tota	al									
								I .		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,060,950.	2,572,714.	1,704,980.	2,140,280.	1,694,882.	10,173,806.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	2,060,950.	2,572,714.	1,704,980.	2,140,280.	1,694,882.	10,173,806.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,503,872.
6	Public support. Subtract line 5 from line 4						8,669,934.
_	tion B. Total Support						0,000,054.
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	2,060,950.	2,572,714.	1,704,980.	2,140,280.	1,694,882.	10,173,806.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	69,485.	59,154.	117,711.	113,430.	133,732.	493,512.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	4,298.					4,298.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	NONE	100.	NONE	NONE	NONE	100.
11	Total support. Add lines 7 through 10						10,671,716.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	2,782,281.
13	First 5 years. If the Form 990 is for organization, check this box and stop here	the organization	on's first, second,	, third, fourth,	or fifth tax yea	ır as a section t	501(c)(3)
Sec	tion C. Computation of Public Supp	oort Percenta	ge				
14	Public support percentage for 2023 (lin	ne 6, column (f)	, divided by line	11, column (f))		14	81.24 %
15	Public support percentage from 2022					15	83.23 %
16a	331/3% support test - 2023. If the org	janization did n	ot check the box	x on line 13, an	d line 14 is 33	1/3 % or more, ch	
	box and stop here. The organization qu	•		_			
b	331/3% support test - 2022. If the org						
	this box and stop here. The organization	-		_			
17a	10%-facts-and-circumstances test - 2	_					
	10% or more, and if the organization					-	-
	Part VI how the organization meets t			_	-		
	organization						
b	10%-facts-and-circumstances test - 2	-					
	15 is 10% or more, and if the organiz					-	
	in Part VI how the organization meets			_			
	organization						
18	Private foundation. If the organization						
	instructions						<u> </u>

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

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

	tion A Dublic Commont			· · ·	<u> </u>	,	
	tion A. Public Support	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
_	endar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2019	(b) 2020	(6) 2021	(u) 2022	(e) 2023	(i) iotai
1	, , , , , , , , , , , , , , , , , , , ,						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	'						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
_	or expended on its behalf						
5							
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons 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						
	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
500	tion B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
_	Amounts from line 6	(a) 2013	(6) 2020	(6) 2021	(d) 2022	(6) 2020	(i) rotai
9 10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on 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, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for	ŭ	· ·		•		` / ` /
	organization, check this box and stop here						
	tion C. Computation of Public Supp					T T	
15	Public support percentage for 2023 (line 8,					15	%
16	Public support percentage from 2022 Sche					16	%
Sec	tion D. Computation of Investment						
17	Investment income percentage for 2023 (lin					17	%
18	Investment income percentage from 2022 S					•	%
19 a	331/3% support tests - 2023. If the or	ganization did	not check the bo	ox on line 14, a	nd line 15 is m	ore than 331/3 %	, and line
	17 is not more than 331/3 %, check this						
b	331/3% support tests - 2022. If the orga						
	line 18 is not more than $331/3\%$, check		•	•		0	
20	Private foundation. If the organization of	did not check	a box on line '	14, 19a, or 19b	, check this bo	x and see instru	uctions

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Part IV Supporting Organizations

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

Section A. All Supporting Organizatior
--

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

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

		Yes	No
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Part	V Supporting Organizations (continued)			- 5 -
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
2 o o ti	on C. Type II Supporting Organizations	2		
Secu	on C. Type ii Supporting Organizations		Yes	No
	Many and all of the consected at the Property of the form the form of the Property of		162	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		
Secti	on D. All Type III Supporting Organizations	•		
	on priville type in eappering 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 on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structio	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr		_
2	Activities Test. Answer lines 2a and 2b 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 on line 2a, above, 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.	26		
_		2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3-2		
L	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
b	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

Page 6 Schedule A (Form 990) 2023

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations	<u> </u>						
1	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 organizations must complete Sections A through E.								
Se	ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
1	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							
	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							
	Other expenses (see instructions)	7							
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Se	ection 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):								
a	Average monthly value of securities	1a							
b	Average monthly cash balances	1b							
C	Fair market value of other non-exempt-use assets	1c							
	Total (add lines 1a, 1b, and 1c)	1d							
е	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 0.015 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 0.035.	6							
7		7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
Se	ection C - Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
	Enter 0.85 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-functional		ted Type III supporting	n organization					
•	(see instructions).	.,ogra							

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	on D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish ea	xempt purposes		1		
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed			
	organizations, in excess of income from activity	2				
3	3 Administrative expenses paid to accomplish exempt purposes of supported organizations					
4	4 Amounts paid to acquire exempt-use assets					
5	5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)					
6	Other distributions (describe in Part VI). See instructions.	6				
7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
		(i)	(ii)	·	(iii)	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
C	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

Schedule A (Form 990) 2023

Part VI Supplementa

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

SCHEDULE A, PART II - OTHER INC	COME					
DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
OTHER INCOME	NONE	100.	NONE	NONE	NONE	100.
TOTALS	NONE	100.	NONE	NONE	NONE	100.
	=======================================	=========	=========	==========	==========	==========

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization		Employer identification number
PRINCETON SYMPHONY	ORCHESTRA, INC.	22-2327766
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated	as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a	a private foundation
	501(c)(3) taxable private foundation	
General Rule	o(7), (8), or (10) organization can check boxes for both the General part of the control of the	
_	y or property) from any one contributor. Complete Parts I and I	
Special Rules		
regulations under 16b, and that rec	on described in section 501(c)(3) filing Form 990 or 990-EZ the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Scheduleived from any one contributor, during the year, total contributor ount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	lle A (Form 990), Part II, line 13, 16a, or ions of the greater of (1) \$5,000; or
contributor, durin literary, or educat	on described in section 501(c)(7), (8), or (10) filing Form 990 or g the year, total contributions of more than \$1,000 exclusively tional purposes, or for the prevention of cruelty to children or a b) instead of the contributor name and address), II, and III.	for religious, charitable, scientific,
contributor, during contributions total during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or the year, contributions exclusively for religious, charitable, et led more than \$1,000. If this box is checked, enter here the town an exclusively religious, charitable, etc., purpose. Don't complies to this organization because it received nonexclusively religions more during the year	c., purposes, but no such tal contributions that were received blete any of the parts unless the gious, charitable, etc., contributions
_	at isn't covered by the General Rule and/or the Special Rules IV, line 2, of its Form 990; or check the box on line H of its For	

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

Schedule B (Form 990) (2023)

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization PRINCETON SYMPHONY ORCHESTRA, INC.

Employer identification number 22-2327766

Part I	Contributors (see instruction	ns). Use duplicate copies of	f Part I if additional space is needed.
--------	-------------------------------	------------------------------	---

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	N/A	\$130,480.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	N/A	\$126,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	N/A	\$130,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	N/A	\$38,145.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	N/A	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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Name of organization PRINCETON SYMPHONY ORCHESTRA, INC.

Employer identification number 22-2327766

Part I	Contributors ((see instructions).	. Use duplicate copies of Part I if additional space is needed.	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A	\$150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_	N/A	\$100,195.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	N/A	\$41,436.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

PRINCETON SYMPHONY ORCHESTRA, INC.

22-2327766

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5 21	16 SHARES OF MASIMO CORP	_	
		\$\$	12/30/2023
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		 \$	
a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ _			
a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		 \$	
a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ _			
n) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Page 4 Schedule B (Form 990) (2023) Name of organization **Employer identification number** PRINCETON SYMPHONY ORCHESTRA, INC. 22-2327766 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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.

Attach to Form 990.

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization Employer identification number PRINCETON SYMPHONY ORCHESTRA, INC. 22-2327766 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included on line 2a . . Number of conservation easements included on line 2c acquired after July 25, 2006, and 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X.....\$_

following amounts required to be reported under FASB ASC 958 relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Pa	rt III Organizations Maintaini	ng Collections of				or Other	Similar As		ontinue	
3	Using the organization's acquisition									
	collection items (check all that appl			•	,		J	J		
а	Public exhibition	• ,	d 🗌	Loan c	or exchai	nge prograi	m			
b	Scholarly research		е 🦳	Other		0 . 0				
С	Preservation for future gene	rations								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part									
	XIII.				•		_	·		
5	During the year, did the organization	n solicit or receive o	donations of	art, histo	orical tre	asures, or	other similar			
	assets to be sold to raise funds rath	er than to be mainta	ained as par	t of the c	organiza	tion's collec	ction?	[Yes	No
Pa	rt IV Escrow and Custodial A	rrangements								
	Complete if the organiza	tion answered "Ye	es" on Form	n 990, P	art IV, I	ine 9, or r	eported an	amoun	t on Fo	rm
	990, Part X, line 21.									
1a	Is the organization an agent, trus	tee, custodian or o	ther interme	ediary fo	r contri	butions or	other assets	s not		
	included on Form 990, Part X?							[Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	olete the follo	owing tab	ole.					
							А	mount		
С	Beginning balance				[1c				
d	Additions during the year				📙	1d				
е	Distributions during the year				📙	1e				
f	Ending balance					1f				
	Did the organization include an am								Yes	No
	If "Yes," explain the arrangement in	n Part XIII. Check h	ere if the exp	olanation	has bee	n provided	in Part XIII.			<u></u>
Pa	rt V Endowment Funds									
	Complete if the organiza						ı			
		(a) Current year	(b) Prior	year	(c) Two	years back	(d) Three year	rs back	(e) Four	ears back
1a	Beginning of year balance	8,834,819.		2,932.		35,762.	6,132,			32,261.
b	Contributions	44,500.	622	2,998.	84	14,178.	1,270,	,585.	7	72,058.
С	Net investment earnings, gains,									
	and losses	771,212.	560	,228.	-1,0	51,322.	1,791,	,425.	3	82,259.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	745,000.		2,500.		51,000.		,000.	2	25,000.
f	Administrative expenses	48,643.		3,839.		44,686.		,168.		28,658.
g	End of year balance	8,856,888.		1,819.		32,932.	8,885,	,762.	6,1	32,920.
2	Provide the estimated percentage			(line 1g,	column	(a)) held as	:			
a	Board designated or quasi-endown		%							
b	Permanent endowment 73.50	<u>00</u> %								
С	Term endowment15.0200 % The percentages on lines 2a, 2b, a	and the should equal:	1000/							
2.0	Are there endowment funds not in			ion that	ara bald	and admir	sistered for th			
Ja	organization by:	the possession of the	ie organizat	ion man	are neiu	anu aunin	iistered for th	ie	<u> </u>	res No
	(i) Unrelated organizations?								3a(i)	X
	(ii) Related organizations?								3a(ii)	X
b	If "Yes" on line 3a(ii), are the relate								3b	21
4	Describe in Part XIII the intended u	•	•						<u> </u>	
	rt VI Land, Buildings, and Equ	uipment								
	Complete if the organiza	ation answered "Y								
	Description of property	(a) Cost or (inves	other basis tment)	(b) Cost o	or other bas ther)		cumulated eciation	(d)	Book valu	ue
1a	Land	,	/	,,,,	- /	2.561				
b	Buildings									
c	Leasehold improvements				26,93	4.	16,760.		10	0,174.
d	Equipment			1	21,48		45,664.			5,819.
e	Other				, _ 3.		-,			,
	I. Add lines 1a through 1e. (Column		ກ 990, Part >	K, line 10	c, colum	n (B))			8!	5,993.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 PRINCETON SYMP	PHONY ORCHESTRA,	INC. 22	2-2327766 Page
Part VII Investments - Other Securities Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11b. See Form 990	, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) POOLED INVESTMENTS	8,203,406.	FMV	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))	8,203,406.		
Part VIII Investments - Program Related	d "Voo" on Form 000	Dort IV line 11e Coe Form 000	Dort V line 12
Complete if the organization answered	1		
(a) Description of investment	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)			
(2)			
(3)			
_(4)			
<u>(5)</u>			
<u>(6)</u>			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered	d "Yes" on Form 990	Part IV line 11d See Form 990	Part X line 15
	escription	, rattiv, iiile tra. eee roiiii eee	(b) Book value
(1)RIGHT OF USE ASSET	,		560,802
(2)SECURITY DEPOSIT			5,073
(3)			3,013
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15,	col. (B))		565,875
Part X Other Liabilities			
Complete if the organization answered line 25.	d "Yes" on Form 990	, Part IV, line 11e or 11f. See For	m 990, Part X,
	otion of liability		(b) Book value
(1) Federal income taxes			
(2)LEASE LIABILITY			561,502
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (b) must occup! Form 900. Part V. line 35, col. (Pl)	<u> </u>		FC1 F00
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	<u>' </u>		561,502

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

JSA 3E1270 1.000 2FK0JS F678

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	1	
1	Total revenue, gains, and other support per audited financial statements	1	3,453,762.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	562,337.
3	Subtract line 2e from line 1	3	2,891,425.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	48,643.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,940,068.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	rn	
1	Total expenses and losses per audited financial statements	1	3,804,541.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	95,217.
3	Subtract line 2e from line 1	3	3,709,324.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	48,643.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,757,967.
Provid 2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; P XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	SUPPLEMENTAL PAGE		

Part XIII Supplemental Information (continued)

PART V, LINE 4

INTENDED USES OF ORGANIZATION'S ENDOWMENT FUNDS:

THE SYMPHONY USES FUNDS DESIGNATED AS ENDOWMENT FUNDS TO TAKE AN ANNUAL DRAW BASED ON A SPENDING FORUMULA, WHICH IS USED TOWARDS OPERATIONS OF THE SYMPHONY. THE ENDOWMENT CAN ALSO BE USED, WITH BOARD APPROVAL, FOR SPECIAL PROJECTS OR TO SUPPLEMENT THE SYMPHONY'S OPERATING BUDGET IN TIMES OF FINANCIAL NEED.

PART V, LINE 3A(I)

ENDOWMENT MANAGEMENT

ENDOWMENT FUNDS ARE INVESTED IN POOLED INVESTMENT ACCOUNTS WHICH ARE HELD AND MANAGED BY THE PRINCETON AREA COMMUNITY FOUNDATION.

PART X, LINE 2

THE ORGANIZATION WAS INCORPORATED IN THE STATE OF NEW JERSEY AS A NONPROFIT ORGANIZATION ON JULY 11, 1980. THE ORGANIZATION HAS RECEIVED A DETERMINATION FROM THE INTERNAL REVENUE SERVICE GRANTING EXEMPTION FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM STATE INCOME TAXES IN ACCORDANCE WITH STATE LAW. THE ORGANIZATION IS SUBJECT TO INCOME TAX ON UNRELATED BUSINESS INCOME WHICH IS GENERATED FROM AD REVENUE.

THE ORGANIZATION HAD NO UNRECOGNIZED TAX BENEFITS AT JUNE 30, 2024 AND 2023 AND HAS INCURRED NO INTEREST OR PENALTIES RELATED TO INCOME TAXES

Schedule D (Form 990) 2023

Part XIII Supplemental Information (continued)

FOR THE PERIODS PRESENTED IN THE FINANCIAL STATEMENTS.

PARTS XI AND XII, LINE 2D

THE FOLLOWING ITEMS ARE SHOWING AS EXPENSES ON THE AUDIT REPORT AND SHOWN

NET OF REVENUE ON THE FORM 990:

SPECIAL EVENT EXPENSES OF \$92,738

COST OF GOODS SOLD OF \$2,479.

2FK0JS F678

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number PRINCETON SYMPHONY ORCHESTRA, INC Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C g In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization contributions? col. (i) Yes No 1 2 3 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990) 2023 PRINCETON SYMPHONY ORCHESTRA, INC. 22-2327766 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events FALL FUNDRAISER ANNUAL GALA (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 377,086. 30,400. 407,486. 2 Less: Contributions 242,100. 12,450. 254,550. 3 Gross income (line 1 134,986. 17,950. 152,936. 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 47,513. 861. 48,374. 7 Food and beverages 8 Entertainment 28,151. ____<u>5</u>,741. 33,892. 9 Other direct expenses 9,039. 1,433. 10,472. 10 Direct expense summary. Add lines 4 through 9 in column (d) 92,738. 11 Net income summary. Subtract line 10 from line 3, column (d) 60,198. Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue Direct Expenses 2 Cash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: 9 Is the organization licensed to conduct gaming activities in each of these states? а If "No," explain: b

Schedule G (Form 990) 2023

10a

If "Yes," explain:

Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Sched	dule G (Form 990 or 990-EZ) 2023 PRINCETON SYMPHONY ORCHESTRA, INC.	22-2327766	Page 3
11 12	Does the organization conduct gaming activities with nonmembers?	Yes L	No
40	formed to administer charitable gaming?	Yes L	No
13	Indicate the percentage of gaming activity conducted in:	120	%
a b	The organization's facility An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events book		/0
14	records:	a and	
	Name ▶		
	Address ►		
15 a	Does the organization have a contract with a third party from whom the organization receives		_
	revenue?	Yes L	No
b	3	and the	
	amount of gaming revenue retained by the third party ► \$		
С	If "Yes," enter name and address of the third party:		
	Name ▶		
	Address ▶		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming pro	ceeds to	
	retain the state gaming license?		No
b	Enter the amount of distributions required under state law to be distributed to other exempt organized		
	or spent in the organization's own exempt activities during the tax year ▶ \$		
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additio (see instructions).		

Schedule G (Form 990 or 990-EZ) 2023

SCHEDULE J (Form 990)

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

PRINCETON SYMPHONY ORCHESTRA, INC.

Employer identification number 22-2327766

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the	_		
3	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	a		

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation		(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
MARC UYS	(i)	161,279.	16,700.	NONE	NONE	11,762.	189,741.	NONE	
1 EXECUTIVE DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
	(i)								
_ 2	(ii)								
	(i)								
_ 3	(ii)								
	(i)								
4	(ii)								
	(i)								
5	(ii)								
	(i)								
6	(ii)								
	(i)								
7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
_10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART II, LINE 1B(II)

INCLUDED IN PART 2, LINE 1B, THE EXECUTIVE DIRECTOR RECEIVED ADDITIONAL

BONUS COMPENSATION APPROVED IN HIS CONTRACT AND BY THE EXECUTIVE

COMMITTEE FOR MEETING SPECIFIED GOALS.

SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

2023
Open to Public
Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

PRINCETON SYMPHONY ORCHESTRA, INC.

22-2327766

Par	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		8	95,634.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (FURNITURE)	X	1	,	FMV			
26	Other (SOFTWARE)	X	1	,	FMV			
27	Other (OTHER)	X	1	3,005.	FMV			
28	Other (
29	Number of Forms 8283 received		•					
	which the organization completed	Form 8283,	Part V, Donee Acknowledge	ement	29			
							Yes	No
30a	During the year, did the organization				_			
	28, that it must hold for at least 3							
	used for exempt purposes for the e	_	period?			30a		X
	If "Yes," describe the arrangement							
31	3							
	contributions?					31	X	
32a	Does the organization hire or us	-	-	·				
_	contributions?					32a		X
	If "Yes," describe in Part II.		alone (a) fan 't '	and the form with the first of the				
33	If the organization didn't report an describe in Part II.	amount in c	column (c) for a type of pro	perty for which column (a) is checked,			

Part II Supple

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

SCHEDULE M, PART I, COLUMN B

THE NUMBER REPORTED IN PART I, COLUMN B, LINE 9 REPRESENTS THE NUMBER OF CONTRIBUTORS.

Schedule M (Form 990) (2023)

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

Omage No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

22-2327766

PRINCETON SYMPHONY ORCHESTRA, INC.

CORE FORM 990 RESPONSES

PART III, LINE 4A - PERFORMING CLASSICAL MASTERWORKS PROGRAM: WHETHER PERFORMING CLASSICAL MASTERWORKS, INTRODUCING MUSIC BY LIVING COMPOSERS, OR HOSTING FAMILIES AND STUDENTS AT THEIR FIRST SYMPHONY PERFORMANCE, THE PRINCETON SYMPHONY ORCHESTRA, INC. (PSO) IS A CULTURAL CENTERPIECE OF THE PRINCETON COMMUNITY AND ONE OF NEW JERSEY'S FINEST MUSIC ORGANIZATIONS. LED BY MUSIC DIRECTOR ROSSEN MILANOV, THE PSO OFFERS CRITICALLY ACCLAIMED ORCHESTRAL, POPS, AND CHAMBER MUSIC PROGRAMS AS WELL AS LECTURES AND EVENTS DESIGNED TO CONNECT THE PUBLIC TO MUSIC. THROUGH PSO BRAVO!, THE ORCHESTRA PRODUCES WIDE-REACHING AND INNOVATIVE EDUCATION PROGRAMS, CARRIED OUT IN PARTNERSHIPS WITH LOCAL SCHOOLS AND COMMUNITY ORGANIZATIONS. A FIVE-TIME GRANTEE OF THE NATIONAL ENDOWMENT FOR THE ARTS, THE PSO IS ALSO A MULTIPLE-YEAR RECIPIENT OF THE NEW JERSEY STATE COUNCIL ON THE ARTS' HIGHEST HONORS - A CITATION OF EXCELLENCE AND DESIGNATION AS A MAJOR ARTS INSTITUTION. THE PSO HAS ALSO EARNED AWARDS FROM ASCAP FOR ADVENTUROUS PROGRAMMING AND FROM THE AARON COPLAND FUND. THE ONLY PROFESSIONAL ORCHESTRA TO MAKE ITS HOME IN PRINCETON, THE PSO PERFORMS AT HISTORIC RICHARDSON AUDITORIUM ON THE CAMPUS OF PRINCETON UNIVERSITY AS WELL AS AT OTHER VENUES THROUGHOUT CENTRAL NEW JERSEY.

PART III, LINE 4B - THE PRINCETON FESTIVAL: FOUNDED IN 2004, THE PRINCETON FESTIVAL QUICKLY ESTABLISHED A REPUTATION FOR ARTISTIC EXCELLENCE AND INNOVATIVE PROGRAMMING IN THE PERFORMING ARTS. EVERY YEAR IN JUNE, THOUSANDS OF PEOPLE FROM THE MID-ATLANTIC REGION AND BEYOND COME TO THE FESTIVAL TO ENJOY THE QUALITY AND VARIETY OF ITS PROGRAMS.

Supplemental Information to Form 990 or 990-EZ

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OMB No. 1545-0047

2023

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PRINCETON SYMPHONY ORCHESTRA, INC.

OFFERINGS INCLUDE OPERA AND MUSICAL THEATER AND A CONSTANTLY EVOLVING SELECTION OF OTHER GENRES, INCLUDING DANCE, WORLD MUSIC, ORCHESTRAL POPS, CHORAL CONCERTS, COUNTRY MUSIC, AND CHAMBER RECITALS. THE FESTIVAL HAS LONG-STANDING PARTNERSHIPS WITH PUBLIC LIBRARIES AND LOCAL CHURCHES, AND PROMOTES LIFE-LONG LEARNING IN THE ARTS THROUGH FREE EDUCATIONAL LECTURES PRESENTED TO A WIDE AND DIVERSE COMMUNITY. FOLLOWING ITS MERGER WITH THE PSO IN 2021, THE PRINCETON FESTIVAL HAS BEEN PRESENTED UNDER AN ENORMOUS PERFORMANCE TENT ON THE BEAUTIFUL GROUNDS OF MORVEN MUSEUM & GARDEN, FURTHERING THE LONG-HELD VISION TO DEVELOP THE FESTIVAL AS A DESTINATION EVENT, AND TO ENGAGE MORE FULLY WITH PRINCETON'S DOWNTOWN AREA.

PART III, LINE 4C - PRINCETON SYMPHONY ORCHESTRA (PSO) HAS A DYNAMIC

IMPACT ON THE LIVES AND EDUCATION OF CHILDREN, INCLUDING UNDERSERVED AND

DISADVANTAGED YOUTH. THE ACCLAIMED EDUCATION PROGRAM BRAVO! IS A MAINSTAY

OF PSO ACTIVITIES, REACHING 10,000 STUDENTS ANNUALLY. NOW IN ITS 29TH

YEAR, BRAVO!'S TOURING SMALL-ENSEMBLE PROGRAM ESTABLISHES PSO MUSICIANS

IN TEACHING PARTNERSHIPS AT MORE THAN 30 PUBLIC, PRIVATE, AND

SPECIAL-NEEDS ELEMENTARY SCHOOLS THROUGHOUT CENTRAL NEW JERSEY.

FULL-ORCHESTRA PERFORMANCES FOR ELEMENTARY SCHOOL STUDENTS ARE HELD EACH

SPRING. AT THE MIDDLE SCHOOL LEVEL, BRAVO! OFFERS LISTEN UP!, A PROGRAM

WHICH BRINGS STUDENTS TO CLASSICAL SERIES CONCERTS AND INVITES THEM TO

CREATE VISUAL ART IN RESPONSE TO THE MUSIC THEY HEAR. HIGH SCHOOL AND

COLLEGE INSTRUMENTALISTS GAIN INVALUABLE EDUCATIONAL EXPERIENCES THROUGH

BRAVO! MASTERCLASSES, TAUGHT BY WORLD-RENOWNED ARTISTS. SINCE FY21, THE

PSO HAS A PARTNERSHIP WITH THE YOUTH ORCHESTRA OF CENTRAL JERSEY (YOCJ)

Supplemental Information to Form 990 or 990-EZ

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Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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PRINCETON SYMPHONY ORCHESTRA, INC

22-2327766

IN WHICH THE PSO'S ASSISTANT CONDUCTOR LEADS YOCJ'S TOP ENSEMBLE, AND PSO MUSICIANS WORK CLOSELY WITH STUDENTS AS PROFESSIONAL MENTORS. FROM KINDERGARTEN THROUGH COLLEGE, BRAVO! INSPIRES THE NEXT GENERATION OFMUSICIANS AND AUDIENCES. PSO SOUNDTRACKS IS A LECTURE SERIES WHICH OFFERS INSIGHTS ABOUT WHAT GOES INTO ORCHESTRATING A CONCERT BY A PROFESSIONAL SYMPHONY. THE SERIES DELVES INTO DIVERSE TOPICS RELATED TO THE MUSIC THAT THE PSO PERFORMS AND WHAT HAPPENS BEHIND THE SCENES:

EVERYTHING FROM WHO CHOOSES THE MUSIC, TO HOW INDIVIDUAL MUSICIANS AND SECTIONS SHAPE THE SOUND OF THE ORCHESTRA, TO THE STORIES BEHIND THE BEAUTIFUL AND OFTEN RARE INSTRUMENTS OWNED AND MAINTAINED BY MEMBERS OF THE PSO. LECTURES ARE HELD AT THE PRINCETON PUBLIC LIBRARY, AND ARE FREE AND OPEN TO THE PUBLIC.

PART V, LINE 4 - INTENDED USES OF ORGANIZATION'S ENDOWMENT FUNDS: THE SYMPHONY USES FUNDS DESIGNATED AS ENDOWMENT FUNDS TO TAKE AN ANNUAL DRAW BASED ON A SPENDING FORMULA, WHICH IS USED TOWARDS OPERATIONS OF THE SYMPHONY. THE ENDOWMENT CAN ALSO BE USED, WITH BOARD APPROVAL, FOR SPECIAL PROJECTS OR TO SUPPLEMENT THE SYMPHONY'S OPERATING BUDGET IN TIMES OF FINANCIAL NEED.

PART V, LINE 3A(I) - ENDOWMENT MANAGEMENT: ENDOWMENT FUNDS ARE INVESTED

IN POOLED INVESTMENT ACCOUNTS WHICH ARE HELD AND MANAGED BY THE PRINCETON

AREA COMMUNITY FOUNDATION.

PART VI, SECTION B, LINE 11B - REVIEW OF FORM 990:

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

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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Inspection

Employer identification number

PRINCETON SYMPHONY ORCHESTRA, INC

22-2327766

THE AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE REVIEW THE FINAL DRAFT OF THE FORM 990 PRIOR TO ITS FILING. ALL BOARD MEMBERS RECEIVE A COPY OF FORM 990 PRIOR TO ITS FILING.

PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST POLICY:

THE SYMPHONY HAS A CONFLICT OF INTEREST POLICY THAT WAS APPROVED BY THE

BOARD OF TRUSTEES. THIS POLICY IS SIGNED BY ALL BOARD MEMBERS AND

FULL-TIME EMPLOYEES ANNUALLY

PART VI, SECTION B, LINE 15 - DETERMINATION OF COMPENSATION:

MEMBERS OF THE EXECUTIVE COMMITTEE MEET TO DISCUSS COMPENSATION ON AN

ANNUAL BASIS AND USE DATA COMPILED, WHERE APPLICABLE, ON SIMILAR- SIZED

SYMPHONIES IN THEIR DECISION MAKING PROCESS. THE EXECUTIVE DIRECTOR IS

PROVIDED A WRITTEN EMPLOYMENT AGREEMENT WHICH IS AGREED TO BY BOTH

PARTIES.

PART VI, SECTION C, LINE 19 - AVAILABILITY OF DOCUMENTS:

THE ORGANIZATION COMPLIES WITH ALL LEGAL REQUIREMENTS REGARDING THE

AVAILABILITY OF THEIR DOCUMENTS.

Name of the organization	Employer identification	Employer identification number			
PRINCETON SYMPHONY (22-2327766	22-2327766			
	•		•		
FORM 990, PART IX - OTHER	FEES				
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	(A)	(B)	(C)	(D)	
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING	
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES	
GUEST ARTISTS	460,014.	460,014.			
PAYROLL PROCESSING	12,709.		12,709.		
OTHER CONSULTANTS	4,125.		4,125.		
TOTALS					
	476,848.	460,014.	16,834.		
	=========	=========	==========	=========	

Name of the organization	Employer identification number		
PRINCETON SYMPHONY ORCHES	22-2327766		
FORM 990, PART X - PREPAID EXPEN			
DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	
PREPAID EXPENSES	13,628.	28,976.	
TOTALS			
	13,628.	28,976.	

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Page 2

Name of the organization Employer identification number PRINCETON SYMPHONY ORCHESTRA, INC. 22-2327766 FORM 990, PART X - DEFERRED REVENUE BEGINNING ENDING DESCRIPTION BOOK VALUE BOOK VALUE -----DEFERRED REVENUE 190,527. 284,298. TOTALS 190,527. 284,298.

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