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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization's mission

TO PRESENT THE WORLD'S GREATEST ARTISTS IN THE STATE'S MOST SPECTACULAR SETTING, TO CONVENE ONGOING CIVIC, SOCIAL, CULTURAL AND INTELLECTUAL EXCHANGES, TO ENGAGE NEW JERSEY'S DIVERSE POPULATION, TO ENHANCE AND TRANSFORM THE LIVES OF CHILDREN AND FAMILIES THROUGH ARTS EDUCATION, TO HELP DRIVE NEWARK'S REVITALIZATION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 12,934,271 including grants of \$) (Revenue \$ 9,656,680)

PERFORMANCES AND PERFORMANCE RELATED PROGRAMS PRESENTED APPROXIMATELY 159 PERFORMANCES AND OTHER EVENTS WITH OVER 250,000 PATRONS IN ATTENDANCE PROGRAMS INCLUDED ORCHESTRA, RECITAL, MUSICAL THEATER, DANCE, POP, VARIETY, JAZZ AND OTHER DISCIPLINES, PERFORMED BY LOCAL, NATIONAL AND INTERNATIONAL ARTISTS

4b

(Code) (Expenses \$ 3,349,757 including grants of \$ 120,546) (Revenue \$ 864,558)

ARTS EDUCATION PROGRAMS CONDUCTED ARTS EDUCATION ACTIVITIES THAT CATER TO THE FULL SPECTRUM OF SCHOOLS' NEEDS AND CHILDREN'S ABILITIES WITH IN-SCHOOL INSTRUCTION THROUGH THE ARTIST-IN-RESIDENCY PROGRAMS, CONSERVATORY-STYLE ARTS TRAINING INITIATIVES FOR TALENTED STUDENTS, PROFESSIONAL DEVELOPMENT FOR EDUCATORS AND LIVE PERFORMANCES THROUGH THE SCHOOLTIME AND FAMILYTIME SERIES PRESENTED APPROXIMATELY 88 SCHOOLTIME AND FAMILYTIME PERFORMANCES WITH A WIDE VARIETY OF ARTISTS IN MUSIC, DANCE AND THEATER IN ADDITION, SUPPLEMENTAL WORKSHOPS, LECTURES, CURRICULUM MATERIALS AND COMMUNITY EVENTS WERE HELD MORE THAN 77,000 CHILDREN, PARENTS AND EDUCATORS WERE SERVED BY NJPAC'S ARTS EDUCATION PROGRAMS DURING THE YEAR ENDED JUNE 30, 2011

4c

(Code) (Expenses \$ 6,663,494 including grants of \$) (Revenue \$)

THEATER OPERATIONS PROVIDED SERVICES FOR THE MANAGEMENT, OPERATION AND MAINTENANCE OF THE ARTS CENTER, PARKING FACILITIES AND THEATER SQUARE PLAZA FOR PUBLIC USE AND ENJOYMENT

4d

Other program services (Describe in Schedule O) See also Additional Data for Description

(Expenses \$ 2,736,197 including grants of \$) (Revenue \$)

4e

Total program service expenses

\$ 25,683,719

Form 990 (2010)

Part IV

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)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
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? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8	Yes
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
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? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	Yes
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
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? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i> 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Parts II and IV.</i> 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV.</i> 	16	No
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? <i>If "Yes," complete Schedule G, Part I (see instructions).</i> 	17	Yes
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> 	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☒ Yes ☐ No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V ☒			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	322
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	567
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
b	If "Yes," enter the name of the foreign country: NT See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes
7 Organizations that may receive deductible contributions under section 170(c).			
a	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	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11 Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
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.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	56	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	51	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ☒ NJ , NY , FL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ☒ RENE TOVERA ONE CENTER STREET NEWARK, NJ 07102 (973) 642-8989

Check if Schedule O contains a response to any question in this Part VII ☒

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

Form **990** (2010)

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								3,157,834		390,574

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization	15
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3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization
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(A) Name and business address	(B) Description of services	(C) Compensation
ELIRAN MURPHY GROUP LTD 1040 AVENUE OF THE AMERICAS NEW YORK, NY 10036	ADVERTISING	510,585
GATEWAY SECURITY INC 604-608 MARKET STREET NEWARK, NJ 07105	SECURITY SERVIC	482,819
ISS TMC SERVICES INC 81 DORSA AVENUE LIVINGSTON, NJ 07039	JANITORIAL SERV	444,461
COLUMBIA ARTISTS MGT LLC 1790 BROADWAY NEW YORK, NY 10019	ARTISTS/PERFORM	391,391
XEROX CORPORATION PO BOX 828187 PHILADELPHIA, PA 19182	PRINTING	295,612
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization	21

Part VIII

Statement of Revenue

					(A)	(B)	(C)	(D)	
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a		9,989,665				
	b	Membership dues	1b						
	c	Fundraising events	1c	1,764,875					
	d	Related organizations	1d	49,235					
	e	Government grants (contributions)	1e	1,151,508					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,024,047					
	g	Noncash contributions included in lines 1a-1f \$		312,516					
	h	Total. Add lines 1a-1f							
	Program Service Revenue				Business Code				
2a		PERFORMANCE RELATED		711110	9,656,680	9,656,680			
b		ARTS EDUCATION REVENUE		711110	864,558	864,558			
c									
d									
e									
f		All other program service revenue							
g		Total. Add lines 2a-2f			10,521,238				
Other Revenue		3	Investment income (including dividends, interest and other similar amounts)						
					1,357,435			1,357,435	
	4	Income from investment of tax-exempt bond proceeds . . .							
	5	Royalties							
	6a	Gross Rents	(i) Real	(ii) Personal	195,592			195,592	
			1,645,555						
			1,449,963						
			195,592						
	b	Less rental expenses							
	c	Rental income or (loss)							
	d	Net rental income or (loss)							
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	3,646,363			3,646,363	
			22,821,578	357,819					
			19,533,034						
			3,288,544	357,819					
	b	Less cost or other basis and sales expenses							
	c	Gain or (loss)							
	d	Net gain or (loss)							
	8a	Gross income from fundraising events (not including \$ 1,764,875 of contributions reported on line 1c) See Part IV, line 18	a		-564,780			-564,780	
			374,850						
			b	Less direct expenses					939,630
	c	Net income or (loss) from fundraising events . . .							
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a						
b			Less direct expenses	b					
c			Net income or (loss) from gaming activities . . .						
10a	Gross sales of inventory, less returns and allowances	a							
		b	Less cost of goods sold					b	
		c	Net income or (loss) from sales of inventory . . .						
Miscellaneous Revenue				Business Code					
11a	PARKING SERVICES	711110	476,575			476,575			
		b	FOOD SERVICES	711110	137,750		137,750		
		c	ADVERTISING FEES	541800	100,067	100,067			
		d	All other revenue		248,847		248,847		
		e	Total. Add lines 11a-11d			963,239			
12	Total revenue. See Instructions			26,108,752	10,521,238	100,067	5,497,782		

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	120,546	120,546		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,034,551	1,359,246	1,334,708	340,597
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	29,000	29,000		
7	Other salaries and wages	6,046,741	4,755,770	570,847	720,124
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	147,129	86,938	47,132	13,059
9	Other employee benefits	1,076,363	863,038	122,525	90,800
10	Payroll taxes	908,319	646,490	155,735	106,094
a	Fees for services (non-employees) Management				
b	Legal	119,974		119,974	
c	Accounting	99,462		99,462	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	39,800			39,800
f	Investment management fees				
g	Other	1,024,145	821,092	133,936	69,117
12	Advertising and promotion	2,903,430	2,636,723	63,386	203,321
13	Office expenses	493,115	330,792	85,150	77,173
14	Information technology				
15	Royalties				
16	Occupancy	2,181,218	2,089,879	87,271	4,068
17	Travel	222,822	199,884	20,370	2,568
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	222,849	133,729	44,064	45,056
20	Interest	147,235	56,947	89,368	920
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,197,293	3,971,579	116,370	109,344
23	Insurance	448,065	448,065		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	ARTIST & PERFORMER FEES	5,055,485	5,054,085	1,200	200
b	REAL ESTATE PRE-DEVELPMNT	679,699	679,699		
c	PARKING OPERATIONS	614,171	614,171		
d	PRODUCTION COSTS	369,155	347,440	21,715	
e	RECRUITMENT	244,689	6,431	205,623	32,635
f	All other expenses	918,754	432,175	358,771	127,808
25	Total functional expenses. Add lines 1 through 24f	31,344,010	25,683,719	3,677,607	1,982,684
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			4,448,980	2	300,101
	3	Pledges and grants receivable, net			17,502,204	3	13,718,680
	4	Accounts receivable, net			858,234	4	989,089
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			915,513	9	701,504
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	185,350,071			
	b	Less: accumulated depreciation	10b	54,145,521	134,864,811	10c	131,204,550
	11	Investments—publicly traded securities			44,142,982	11	50,257,233
	12	Investments—other securities. See Part IV, line 11			10,731,871	12	14,784,310
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line 34)			213,464,595	16	211,955,467	
Liabilities	17	Accounts payable and accrued expenses			3,911,496	17	3,802,062
	18	Grants payable				18	
	19	Deferred revenue			2,290,829	19	2,094,151
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			5,800,000	23	4,450,000
	24	Unsecured notes and loans payable to unrelated third parties			1,133,477	24	1,329,172
	25	Other liabilities. Complete Part X of Schedule D			395,323	25	425,570
	26	Total liabilities. Add lines 17 through 25			13,531,125	26	12,100,955
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			124,377,646	27	123,564,654
	28	Temporarily restricted net assets			14,186,227	28	14,092,283
	29	Permanently restricted net assets			61,369,597	29	62,197,575
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			199,933,470	33	199,854,512
34	Total liabilities and net assets/fund balances			213,464,595	34	211,955,467	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,108,752
2	Total expenses (must equal Part IX, column (A), line 25)	2	31,344,010
3	Revenue less expenses Subtract line 2 from line 1	3	-5,235,258
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	199,933,470
5	Other changes in net assets or fund balances (explain in Schedule O)	5	5,156,300
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	199,854,512

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Employer identification number
22-2889703

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check 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 **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	20,172,682	17,560,840	27,176,452	12,176,706	9,989,665	87,076,345
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	20,172,682	17,560,840	27,176,452	12,176,706	9,989,665	87,076,345
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)						19,270,067
6 Public Support. Subtract line 5 from line 4						67,806,278

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	20,172,682	17,560,840	27,176,452	12,176,706	9,989,665	87,076,345
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	961,814	847,236	1,505,500	1,516,290	1,553,027	6,383,867
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1,437,906	6,702,595	1,303,510	987,920	963,239	11,395,170
11 Total support (Add lines 7 through 10)						104,855,382
12 Gross receipts from related activities, etc. (See instructions.)					12	10,521,238
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	64 670 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	65 090 %
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶		

Part IV

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

Additional Data

Software ID:

Software Version:

EIN: 22-2889703

Name: NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LAWRENCE P GOLDMAN PRESIDENT &	50 00	X		X				750,027	0	128,206
A MICHAEL LIPPER BOARD MEMBER	1 00	X						0	0	0
ALLEN L BILDNER BOARD MEMBER	1 00	X						0	0	0
ANDREW P SIDAMON-ERISTOFF BOARD MEMBER	1 00	X						0	0	0
ANN D BOROWIEC BOARD MEMBER	1 00	X						0	0	0
ANN M LIMBERG BOARD MEMBER	1 00	X						0	0	0
ANNE E ESTABROOK BOARD MEMBER	1 00	X						0	0	0
ARTHUR F RYAN CHAIRMAN EME	1 00	X						0	0	0
J FLETCHER CREAMER BOARD MEMBER	1 00	X						0	0	0
BRENDAN P DOUGHER BOARD MEMBER	1 00	X						0	0	0
BRIAN T BEDOL BOARD MEMBER	1 00	X						0	0	0
GREGG GERKEN BOARD MEMBER	1 00	X						0	0	0
JEFFREY S SHERMAN ESQ BOARD MEMBER	1 00	X						0	0	0
CHRISTINE C GILFILLAN BOARD MEMBER	1 00	X						0	0	0
CHRISTOPHER J CHRISTIE BOARD MEMBER	1 00	X						0	0	0
CLIFFORD M SOBEL BOARD MEMBER	1 00	X						0	0	0
STEPHEN M VAJTAY JR ESQ BOARD MEMBER	1 00	X						0	0	0
CORY A BOOKER BOARD MEMBER	1 00	X						0	0	0
DAVID S STONE BOARD MEMBER	1 00	X						0	0	0
DEBORAH SAGNER BOARD MEMBER	1 00	X						0	0	0
DENNIS M BONE BOARD MEMBER	1 00	X						0	0	0
DIANA T VAGELOS BOARD MEMBER	1 00	X						0	0	0
DONALD A ROBINSON ASSISTANT SE	1 00	X		X				0	0	0
DONALD PAYNE JR BOARD MEMBER	1 00	X						0	0	0
FRED CORRADO BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HAROLD MORRISON BOARD MEMBER	1 00	X						0	0	0
HAROLD R DENTON BOARD MEMBER	1 00	X						0	0	0
J CHRIS SCALET BOARD MEMBER	1 00	X						0	0	0
JOHN R STRANGFELD JR BOARD MEMBER	1 00	X						0	0	0
JOSEPH N DIVINCENZO JR BOARD MEMBER	1 00	X						0	0	0
JOSH S WESTON BOARD MEMBER	1 00	X						0	0	0
JUDITH JAMISON BOARD MEMBER	1 00	X						0	0	0
KIMBERLY GUADAGNO BOARD MEMBER	1 00	X						0	0	0
LAWRENCE E BATHGATE BOARD MEMBER	1 00	X						0	0	0
LEON G COOPERMAN BOARD MEMBER	1 00	X						0	0	0
LEONARD LIEBERMAN BOARD MEMBER	1 00	X						0	0	0
LUCIA DINAPOLI GIBBONS BOARD MEMBER	1 00	X						0	0	0
MARC E BERSON TREASURER	1 00	X		X				0	0	0
MARC H MORIAL BOARD MEMBER	1 00	X						0	0	0
MICHAEL A TANENBAUM BOARD MEMBER	1 00	X						0	0	0
MICHAEL R GRIFFINGER SECRETARY	1 00	X		X				0	0	0
N LYNNE HUGHES BOARD MEMBER	1 00	X						0	0	0
NINA M WELLS BOARD MEMBER	1 00	X						0	0	0
PAT A DIFILIPPO BOARD MEMBER	1 00	X						0	0	0
PERCY CHUBB III BOARD MEMBER	1 00	X						0	0	0
RALPH A LAROSSA BOARD MEMBER	1 00	X						0	0	0
RAYMOND G CHAMBERS FOUNDING CHA	1 00	X		X				0	0	0
ROBERT C WAGGONER BOARD MEMBER	1 00	X						0	0	0
SAVION GLOVER BOARD MEMBER	1 00	X						0	0	0
SHARON E BURTON TURNER BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SHEILA F KLEHM BOARD MEMBER	1 00	X						0	0	0
STEVEN E GROSS BOARD MEMBER	1 00	X						0	0	0
STEVEN M GOLDMAN ASSISTANT TR	1 00	X		X				0	0	0
SUSAN N SOBBOTT BOARD MEMBER	1 00	X						0	0	0
THOMAS H KEAN BOARD MEMBER	1 00	X						0	0	0
THOMAS M O'FLYNN BOARD MEMBER	1 00	X						0	0	0
VERONICA M GOLDBERG BOARD MEMBER	1 00	X						0	0	0
VICTOR PARSONNET BOARD MEMBER	1 00	X						0	0	0
WILLIAM J MARINO CHAIRMAN	1 00	X		X				0	0	0
BARBARA ARBESFELD EXEC V PRE	50 00			X				297,743	0	24,241
PETER HANSEN VICE PRESIDE	50 00			X				223,444	0	21,596
STEPHANIE HUGHLEY VICE PRESIDE	50 00			X				195,627	0	11,173
CATRINA BOISSON VICE PRESIDE	50 00			X				178,396	0	23,422
WARREN TRANQUADA VICE PRESIDE	50 00			X				165,760	0	5,588
JEFFREY NORMAN VICE PRESIDE	50 00			X				146,967	0	9,112
SANDRA BOWIE VICE PRESIDE	50 00			X				130,932	0	9,966
ROSS RICHARDS VICE PRESIDE	50 00			X				126,080	0	14,701
AUSTIN CLEARY ASST VICE PR	50 00			X				124,313	0	9,524
CAROLYN VAN DUSEN ASST VICE PR	50 00			X				123,413	0	16,165
RENATO TOVERA ASST VICE PR	50 00			X				102,482	0	21,111
CHAD SPIES ASST VICE PR	50 00			X				96,440	0	18,545
BARAKA SELE ASST VICE PR	50 00			X				93,256	0	6,641
SANAZ HOJREH ASST VICE PR	50 00			X				77,668	0	9,611
ERNEST DIROCCO CIO	50 00					X		116,270	0	18,188
WILLIAM WORMAN HEAD CREW	50 00					X		105,561	0	21,806

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors						
(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)				
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee
(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
PAUL ALLSHOUSE HEAD CREW	50.00					X
103,455	0	20,978				

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code	) (Expenses \$	2,736,197	including grants of \$ (Revenue \$)
MARKETING AND PUBLIC AFFAIRS NJPAC KEEPS THE PUBLIC AND THE MEDIA FULLY INFORMED ABOUT ITS PROGRAMS, EVENTS AND EDUCATIONAL ACTIVITIES REAL ESTATE DEVELOPMENT PLANNING, IMPROVEMENT AND DEVELOPMENT OF OWNED/LEASED REAL ESTATE IN FURTHERANCE OF NJPAC'S MISSION OF DRIVING THE REVITALIZATION OF CITY OF NEWARK			

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Employer identification number
22-2889703

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	☐ Yes☒ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	☐ Yes☒ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☒ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes☒ No

9

In Part XIV, 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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

1b

If the organization elected, as permitted under SFAS 116, 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

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____ 129,220

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	57,336,855	53,714,417	62,559,026		
b Contributions	788,404	-264,720	7,472,587		
c Investment earnings or losses	10,136,798	6,276,618	-13,718,203		
d Grants or scholarships					
e Other expenditures for facilities and programs	2,475,765	2,389,460	2,598,993		
f Administrative expenses					
g End of year balance	65,786,292	57,336,855	53,714,417		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 100 000 %

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		174,008,610	46,228,992	127,779,618
c Leasehold improvements				
d Equipment		11,317,535	7,916,529	3,401,006
e Other		23,926		23,926
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				131,204,550

Schedule D (Form 990) 2010

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	126,108,752
2	Total expenses (Form 990, Part IX, column (A), line 25)	31,344,010
3	Excess or (deficit) for the year Subtract line 2 from line 1	-5,235,258
4	Net unrealized gains (losses) on investments	5,156,300
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	114,569
9	Total adjustments (net) Add lines 4 - 8	5,270,869
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	35,611

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	131,726,485
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments	2a5,156,300
b	Donated services and use of facilities	2b346,864
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV)	2d114,569
e	Add lines 2a through 2d	2e5,617,733
3	Subtract line 2e from line 1	326,108,752
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV)	4b
c	Add lines 4a and 4b	4c
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	526,108,752

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	131,690,874
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities	2a346,864
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIV)	2d
e	Add lines 2a through 2d	2e346,864
3	Subtract line 2e from line 1	331,344,010
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV)	4b
c	Add lines 4a and 4b	4c
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	531,344,010

Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.		
Identifier	Return Reference	Explanation
INTENDED USES FOR ENDOWMENT FUNDS	SCHEDULE D, PAGE 2, PART V, LINE 4	ENDOWMENT FUND REVENUE IS USED FOR GENERAL OPERATING SUPPORT UNLESS RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE
LIABILITY UNDER FIN 48 FOOTNOTE	SCHEDULE D, PAGE 3, PART X	THERE ARE CERTAIN TRANSACTIONS THAT COULD BE DEEMED UNRELATED BUSINESS INCOME AND WOULD RESULT IN A TAX LIABILITY. NJPAC MANAGEMENT REVIEWS TRANSACTIONS TO ESTIMATE POTENTIAL TAX LIABILITIES USING A THRESHOLD OF MORE LIKELY THAN NOT. IT IS MANAGEMENT'S ESTIMATION THAT THERE ARE NO MATERIAL TAX LIABILITIES THAT NEED TO BE RECORDED.
RECONCILIATION OF CHANGES - OTHER	SCHEDULE D, PAGE 4, PART XI, LINE 8	NET INVESTMENT INCOME OF THE ARTS EDUCATION ENDOWMENT 0 FUND IN HONOR OF RAYMOND G CHAMBERS INC - INCLUDED IN 0 CONSOLIDATED AUDITED FINANCIAL STATEMENTS 114,569
REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	NET INVESTMENT INCOME OF THE ARTS EDUCATION ENDOWMENT 0 FUND IN HONOR OF RAYMOND G CHAMBERS INC - INCLUDED IN 0 CONSOLIDATED AUDITED FINANCIAL STATEMENTS 114,569

1

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► _____

3 Enter total number of other organizations or entities ► _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Part V if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐ Yes

☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes

☐ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐ Yes

☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes

☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐ Yes

☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes

☐ No

Part V

Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
ADDITIONAL INFORMATION	SCHEDULE F, PAGE 5, PART V	PART I, LINE 3, COLUMN F METHOD OF VALUATION OF INVESTMENTS - FAIR MARKET VALUE

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		ANNUAL GALA (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	2,139,725		2,139,725
	2	Less Charitable contributions	1,764,875		1,764,875
	3	Gross income (line 1 minus line 2)	374,850		374,850
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs	29,996		29,996
	7	Food and beverages	259,737		259,737
	8	Entertainment	241,283		241,283
	9	Other direct expenses	408,614		408,614
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			939,630
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			-564,780

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	☐ Yes _____% ☐ No	☐ Yes _____% ☐ No	☐ Yes _____% ☐ No
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name  _____

Address  _____

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____

c

If "Yes," enter name and address

Name  _____

Address  _____

16 Gaming manager information

Name  _____

Gaming manager compensation  \$ _____

Description of services provided  _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
CUSTODY OR CONTROL ARRANGEMENT	SCHEDULE G PAGE 1 PART I LINE 2B COLUMN III	EVERGREEN PARTNERS INC NJPAC HAS CUSTODY AND CONTROL OF CONTRIBUTIONS THE LUKENS COMPANY NJPAC HAS CUSTODY AND CONTROL OF CONTRIBUTIONS
FUNDRAISING VS REIMBURSEMENT EXPLANATION	SCHEDULE G PAGE 1 PART I LINE 2B COLUMN V	EVERGREEN PARTNERS INC FIXED RETAINER FEE PLUS ACTUAL REIMBURSABLE EXPENSES THE LUKENS COMPANY FIXED RETAINER FEE PLUS ACTUAL REIMBURSABLE EXPENSES

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER
CORPORATION

Employer identification number
22-2889703

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

- 2

Enter total number of section 501(c)(3) and government organizations ▶
- 3

Enter total number of other organizations ▶

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) THE STAR-LEDGER					
(2) SCHOLARSHIPS	12	80,000			
(3) THE JEFFREY CAROLLO MUSIC					
(4) SCHOLARSHIPS	12	19,296			
(5) THE MCJ BERKLEE COLLEGE					
(6) OF MUSIC SCHOLARSHIPS	5	21,250			

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	THE STAR LEDGER SCHOLARSHIP PROGRAM IS DESIGNED TO PROVIDE HIGHER EDUCATION OPPORTUNITIES FOR YOUNG PEOPLE IN NEWARK THIS PROGRAM ENABLES NJPAC TO IDENTIFY, CULTIVATE AND TRAIN GIFTED COLLEGE-BOUND NEWARK HIGH SCHOOL SENIORS WHO DEMONSTRATE THE POTENTIAL TO BECOME LEADING ARTS PROFESSIONALS THE SCHOLARSHIPS SUPPORT A 4-YEAR EDUCATION LEADING TO THE COMPLETION OF A DEGREE FROM AN ACCREDITED UNDERGRADUATE INSTITUTION THE SCHOLARSHIPS ALSO PROVIDE THE OPPORTUNITY TO GAIN PRACTICAL EXPERIENCE THROUGH INTERNSHIPS AT NJPAC THE JEFFREY CAROLLO MUSIC SCHOLARSHIP PROGRAM PROVIDES COMPREHENSIVE TRAINING FOR SELECTED STUDENTS THROUGH THE MUSIC PROGRAMS AT THE NEWARK SCHOOL OF THE ARTS (NSA) NSA IS A COMMUNITY-BASED ORGANIZATION COMMITTED TO PROVIDING ACCESS TO SEQUENTIAL, COMPREHENSIVE ARTS EDUCATION AND PERFORMANCE ACTIVITIES MCJ-AMELIOR FOUNDATION SPONSORED FIVE FULL SCHOLARSHIPS TO THE 2010 BERKLEE FIVE-WEEK SUMMER PERFORMANCE PROGRAM SCHOLARS WERE CHOSEN THROUGH FACULTY RECOMMENDATION AND AUDITIONS THE SCHOLARS JOINED APPROXIMATELY 900 PARTICIPANTS FROM THE US AND 69 OTHER COUNTRIES TO SHARE IN A PREMIERE CONTEMPORARY MUSIC SUMMER PROGRAM FOR YOUNG MUSICIANS WITH WORLD-CLASS BERKLEE FACULTY, VISITING ARTISTS AND STATE-OF-THE ART FACILITIES CANDIDATES MUST AUDITION AT THE NJPAC'S ANNUAL YOUNG ARTIST TALENT SEARCH AUDITIONEERS ARE EVALUATED ON TECHNICAL ABILITY AND ARTISTIC INTERPRETATION BY AN AUDITION COMMITTEE AND SCHOLARSHIP ADVISORY COMMITTEE SCHOLARSHIP GRANTS ARE PAID DIRECTLY TO THE SCHOOL BY NJPAC UP TO THE GRANT AMOUNT IN CASES WHERE THE GRANT EXCEEDS THE TUITION DUE, IT IS PAID TO THE STUDENT TO COVER OTHER EDUCATIONAL EXPENSES FOR THE TERM ALL SCHOLARSHIP PAYMENTS ARE CONTINGENT ON VERIFICATION OF ENROLLMENT EACH SEMESTER

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Employer identification number
22-2889703

Part I

Questions Regarding Compensation

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LAWRENCE P GOLDMAN	(i) (ii)	522,964	206,305	20,758	110,591	17,615	878,233	
(2) BARBARA ARBESFELD	(i) (ii)	229,161	57,500	11,082	6,737	17,504	321,984	
(3) PETER HANSEN	(i) (ii)	183,745	29,000	10,699	1,926	19,670	245,040	
(4) STEPHANIE HUGHLEY	(i) (ii)	158,056	34,000	3,571	4,202	6,971	206,800	
(5) CATRINA BOISSON	(i) (ii)	149,646	27,990	760	3,173	20,249	201,818	
(6) WARREN TRANQUADA	(i) (ii)	140,160	25,200	400	4,200	1,388	171,348	
(7) JEFFREY NORMAN	(i) (ii)	122,080	21,600	3,287	2,493	6,619	156,079	
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part IIISupplemental Information

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

Identifier	Return Reference	Explanation
FRINGE OR EXPENSE EXPLANATION	SCHEDULE J, PAGE 1, PART I, LINE 1A	TAX INDEMNIFICATION AND GROSS-UP PAYMENTS CERTAIN OFFICERS ARE REIMBURSED FOR THE COST OF OBTAINING SUPPLEMENTAL INSURANCE AS PROVIDED IN THEIR EMPLOYMENT CONTRACTS. THE REIMBURSEMENT PAYMENT IS GROSSED-UP TO ACCOUNT FOR THE ADDITIONAL TAX COST OF RECEIVING THIS BENEFIT. THE GROSSED-UP AMOUNT IS REPORTED AS TAXABLE INCOME IN THE OFFICERS' W-2.
NON-FIXED PAYMENTS PROVIDED	SCHEDULE J, PAGE 1, PART I, LINE 7	A VARIABLE PORTION OF THE COMPENSATION OF CERTAIN OFFICERS IS "AT RISK." A TARGET AMOUNT FOR THIS VARIABLE COMPENSATION IS SET FOR EACH OFFICER WHICH IS A PERCENTAGE OF SALARY BASED ON LEVEL OF POSITION. PURSUANT TO NJPAC POLICY AS APPROVED AND REVIEWED PERIODICALLY BY THE HUMAN RESOURCES COMMITTEE OF THE BOARD, PAYMENT OF UP TO THE MAXIMUM OF THIS TARGET IS DETERMINED BASED ON THE OFFICER'S ANNUAL PERFORMANCE REVIEW.

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Employer identification number
22-2889703

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ► \$										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) RALPH A LAROSSA	BOARD MEMBER	611,110	PSE&G- ELECTRIC		No
(2) WILLIAM J MARINO	BOARD MEMBER	849,761	HORIZON- INSURANCE		No
(3) DENNIS M BONE	BOARD MEMBER	102,378	VERIZON-TELEPHONE		No
(4) JUDITH JAMISON	BOARD MEMBER	180,000	A AILEY-PERFORMANCE		No
(5) CLIVE S CUMMIS	FORMER BOARD M	29,000	FAMILY - CONSULTANT		No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Employer identification number
22-2889703

Part I 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	(d) Method of determining oncash contribution amounts
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	X	1	312,516	MARKET
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 ► ()				
26 Other ►()				
27 Other ►()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Yes	No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part III

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization NEW JERSEY PERFORMING ARTS CENTER CORPORATION	Employer identification number 22-2889703
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Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	TO PRESENT THE WORLD'S GREATEST ARTISTS IN THE STATE'S MOST SPECTACULAR SETTING, TO CONVENE ONGOING CIVIC, SOCIAL, CULTURAL AND INTELLECTUAL EXCHANGES, TO ENGAGE NEW JERSEY'S DIVERSE POPULATION, TO ENHANCE AND TRANSFORM THE LIVES OF CHILDREN AND FAMILIES THROUGH ARTS EDUCATION, TO HELP DRIVE NEWARK'S REVITALIZATION

Identifier	Return Reference	Explanation
ALL OTHER ACHIEVEMENTS DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	MARKETING AND PUBLIC AFFAIRS NJPAC KEEPS THE PUBLIC AND THE MEDIA FULLY INFORMED ABOUT ITS PROGRAMS, EVENTS AND EDUCATIONAL ACTIVITIES REAL ESTATE DEVELOPMENT PLANNING, IMPROVEMENT AND DEVELOPMENT OF OWNED/LEASED REAL ESTATE IN FURTHERANCE OF NJPAC'S MISSION OF DRIVING THE REVITALIZATION OF CITY OF NEWARK

Identifier	Return Reference	Explanation
FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES	FORM 990, PART V, LINE 4B	NETHERLANDS ANTILLES, CAYMAN ISLANDS

Identifier	Return Reference	Explanation
RELATED PARTY INFORMATION AMONG OFFICERS	FORM 990, PAGE 6, PART VI, LINE 2	MARC BERSON RAY MOND G CHAMBERS DIRECTOR DIRECTOR BUSINESS RELATIONSHIP RAY MOND G CHAMBERS ALLEN L BILDNER DIRECTOR DIRECTOR BUSINESS RELATIONSHIP RAY MOND G CHAMBERS LAWRENCE P BATHGATE DIRECTOR DIRECTOR BUSINESS RELATIONSHIP RAY MOND G CHAMBERS CHRISTINE C GILFILLAN DIRECTOR DIRECTOR FAMILY RELATIONSHIP GREGG GERKEN MARC BERSON DIRECTOR DIRECTOR BUSINESS RELATIONSHIP ROSS RICHARDS SANAZ HOJREH OFFICER OFFICER FAMILY RELATIONSHIP RAY MOND G CHAMBERS ARTHUR F RYAN DIRECTOR DIRECTOR BUSINESS RELATIONSHIP RAY MOND G CHAMBERS CLIFFORD M SOBEL DIRECTOR DIRECTOR BUSINESS RELATIONSHIP STEPHEN M VAJTAY, JR RALPH A LAROSSA DIRECTOR DIRECTOR BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	FORM 990 IS PREPARED INTERNALLY BY THE FINANCE DEPARTMENT. THE DRAFT FORM 990 IS REVIEWED BY THE INDEPENDENT ACCOUNTING FIRM OF KPMG. THE AUDIT COMMITTEE THEN REVIEWS AND APPROVES THE FINAL 990 IN A MEETING ATTENDED BY COMMITTEE MEMBERS, NJPAC MANAGEMENT AND INDEPENDENT ACCOUNTANTS. AFTER APPROVAL, A COMPLETE COPY OF THE 990 IS PROVIDED TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW. THE AUDIT COMMITTEE CHAIR, CHIEF FINANCIAL OFFICER AND THE INDEPENDENT ACCOUNTANTS MAKE THEMSELVES AVAILABLE FOR QUESTIONS PRIOR TO THE FILING OF THE RETURN WITH THE IRS.

Identifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES COMPLETE AN ANNUAL QUESTIONNAIRE TO DISCLOSE POTENTIAL CONFLICTS. THE QUESTIONNAIRE INCLUDES KEY DEFINITIONS AND EXAMPLES. IN ADDITION, THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY WITH OFFICERS, DIRECTORS AND KEY EMPLOYEES AND THE SAME ARE REGULARLY REMINDED TO DISCLOSE ANY CHANGES. FOR ALL ACTUAL AND POTENTIAL CONFLICTS THAT ARE IDENTIFIED BY NJPAC MANAGEMENT, THE AFFECTED PERSON IS REQUIRED TO RECUSE HIMSELF OR HERSELF FROM ALL TRANSACTIONS, DELIBERATIONS, NEGOTIATIONS AND OTHER MATTERS RELATING TO SUCH INTEREST. NEW OFFICERS, DIRECTORS AND KEY EMPLOYEES UNDERGO AN ORIENTATION WHICH INCLUDES A REVIEW OF THE CONFLICT OF INTEREST POLICY.

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE HUMAN RESOURCES COMMITTEE ANNUALLY ENGAGES AN INDEPENDENT CONSULTANT TO PROVIDE COMPARABILITY DATA FOR ALL VICE PRESIDENT LEVEL AND ABOVE OFFICERS. THE CONSULTANT ADVISES THE COMMITTEE ON THE REASONABLENESS OF CURRENT COMPENSATION. THE PRESIDENT AND CEO ADVISES THE COMMITTEE ON ACTIONS IMPACTING THE COMPENSATION OF VICE PRESIDENTS. THE EMPLOYMENT CONTRACTS FOR THE PRESIDENT AND CEO, EXECUTIVE VICE PRESIDENT AND COO, VICE PRESIDENT OF DEVELOPMENT, AND PRESIDENT OF THEATER SQUARE DEVELOPMENT COMPANY ARE REVIEWED BY THE COMMITTEE AND THE CONSULTANT. THE HUMAN RESOURCES COMMITTEE CHAIR RECOMMENDS THE CONTRACTS TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR REVIEW AND APPROVAL. THE BOARD OF DIRECTORS IS INFORMED OF THE NATURE OF THE PROCESS AND MAY REQUEST ADDITIONAL INFORMATION FROM THE HUMAN RESOURCES COMMITTEE CHAIR. THE DELIBERATIONS AND DECISION OF THE HUMAN RESOURCES COMMITTEE ARE DOCUMENTED CONTEMPORANEOUSLY IN THE MINUTES. THE MINUTES ARE SUBMITTED TO THE EXECUTIVE COMMITTEE OF THE BOARD AND ARE ALSO DOCUMENTED IN THE MINUTES. NO INDIVIDUALS WHO HAVE A CONFLICT OF INTEREST MAY BE INVOLVED IN THE COMPENSATION REVIEW, DISCUSSIONS AND DECISIONS.

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	THE HUMAN RESOURCES COMMITTEE ANNUALLY ENGAGES AN INDEPENDENT CONSULTANT TO PROVIDE COMPARABILITY DATA FOR ALL VICE PRESIDENT LEVEL AND ABOVE OFFICERS THE PRESIDENT AND CEO ADVISES THE COMMITTEE ON ACTIONS IMPACTING THE COMPENSATION OF VICE PRESIDENTS THE VICE PRESIDENTS RECOMMEND THE COMPENSATION OF THEIR RESPECTIVE ASSISTANT VICE PRESIDENTS AND KEY EMPLOYEES BASED ON ANNUAL PERFORMANCE REVIEWS AND IN COMPLIANCE WITH COMPENSATION POLICY SET FOR THE ORGANIZATION

Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	NJPAC PUBLISHES AN ANNUAL REPORT TO THE COMMUNITY WHICH INCLUDES FINANCIAL STATEMENT HIGHLIGHTS THIS REPORT IS DISTRIBUTED TO KEY STAKEHOLDERS AND IS AVAILABLE ON ITS WEBSITE - WWW NJPAC ORG NJPAC'S CONFLICT OF INTEREST POLICY , FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE DISTRIBUTED TO THE BOARD OF DIRECTORS AND ARE AVAILABLE TO THE GENERAL PUBLIC ON REQUEST FORM 990 IS ALSO AVAILABLE AT WWW GUIDESTAR ORG

Identifier	Return Reference	Explanation
RELATED ORGANIZATIONS	FORM 990, PAGE 7, PART VII	SECTION A, COLUMN B - ESTIMATED HOURS PER WEEK FOR RELATED ORGANIZATIONS LAWRENCE P GOLDMAN 2 A MICHAEL LIPPER 1 ALLEN L BILDNER 1 ANDREW P SIDAMON-ERISTOFF 1 ANN D BOROWIEC 1 ANN M LIMBERG 1 ANNE E ESTABROOK 1 ARTHUR F RYAN 1 J FLETCHER CREAMER 1 BRENDAN P DOUGHER 1 BRIAN T BEDOL 1 GREGG GERKEN 1 JEFFREY S SHERMAN 1 CHRISTINE C GILFILLAN 1 CHRISTOPHER J CHRISTIE 1 CLIFFORD M SOBEL 1 STEPHEN M VAJTAY JR 1 CORY A BOOKER 1 DAVID S STONE 1 DEBORAH SAGNER 1 DENNIS M BONE 1 DIANA VAGELOS 1 DONALD A ROBINSON 1 DONALD PAYNE JR 1 FRED CORRADO 1 HAROLD MORRISON 1 HAROLD DENTON 1 J CHRIS SCALET 1 JOHN STRANGFELD 1 JOSEPH N DIVINCENZO 1 JOSH S WESTON 1 JUDITH JAMISON 1 KIMBERLY GUADAGNO 1 LAWRENCE E BATHGATE 1 LEON G COOPERMAN 1 LEONARD LIEBERMAN 1 LUCIA DINAPOLI GIBBONS 1 MARC E BERSON 1 MARC H MORIAL 1 MICHAEL TANENBAUM 1 MICHAEL R GRIFFINGER 1 N LYNNE HUGHES 1 NINA M WELLS 1 PAT DIFILIPPO 1 PERCY CHUBB III 1 RALPH LAROSSA 1 RAYMOND G CHAMBERS 1 ROBERT C WAGGONER 1 SAVION GLOVER 1 SHARON E BURTON 1 SHEILA F KLEHM 1 STEVEN E GROSS 1 STEVEN M GOLDMAN 1 SUSAN SOBBOTT 1 THOMAS H KEAN 1 THOMAS M O'FLYNN 1 VERONICA M GOLDBERG 1 VICTOR PARSONNET 1 WILLIAM J MARINO 1 BARBARA ARBESFELD 1 PETER HANSEN 1 STEPHANIE HUGHLEY 1 CATRINA BOISSON 1 WARREN TRANQUADA 2 JEFFREY NORMAN 1 SANDRA BOWIE 2 ROSS RICHARDS 1 AUSTIN CLEARY 1 CAROLYN VAN DUSEN 1 RENATO TOVERA 5 CHAD SPIES 1 BARAKA SELE 1 SANAZ HOJREH 1 ERNEST DIROCCO 0 WILLIAM WORMAN 0 PAUL ALLHOUSE 0

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS EXPLANATION	FORM 990, PART XI, LINE 5	NET UNREALIZED GAIN ON INVESTMENTS - 5,156,300

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NEW JERSEY PERFORMING ARTS CENTER CORPORATION

Employer identification number
22-2889703

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) THEATER SQUARE DEVELOPMENT COMPANY ONE CENTER STREET NEWARK, NJ 07102 61-1674276	R/ESTATE	NJ			NA

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) THE ARTS EDUCATION ENDOWMENT FUND ONE CENTER STREET NEWARK, NJ 07102 22-3196074	SUPPORTNG	NJ	501C3	11A	NJPAC	Yes	

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) NJ CTR FOR PERFORMING ARTS DEV CORP NJ CTR FOR PERFORMING ARTS DEV CORP ONE CENTER STREET NEWARK, NJ07102 22-2049475	R/ ESTATE	NJ	NA	C CORP			100 000 %

Part V

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

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

1

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

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

Yes

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) THE ARTS EDUCATION ENDOWMENT FUND	C		
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2010

Attachment
Sequence No 67

Department of the Treasury
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return NEW JERSEY PERFORMING ARTS CENTER CORPORATION	Business or activity to which this form relates INDIRECT DEPRECIATION	Identifying number 22-2889703
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 .	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	4,197,293

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	4,197,293
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No						24b If "Yes," is the evidence written? ☐ Yes ☐ No			
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost	
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25		
26 Property used more than 50% in a qualified business use									
		%							
		%							
		%							
27 Property used 50% or less in a qualified business use									
		%				S/L -			
		%				S/L -			
		%				S/L -			
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28			
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29		

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2010 tax year (see instructions)					
43 Amortization of costs that began before your 2010 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	