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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

<u>A</u>	or the	2010 calendar year, or tax year beginning JUL 1, 2010 and endi	ing J	UN 30, 2011	L	
В	Check of applicable	C Name of organization		D Employer identif	ication number	
Ĺ	Address change	NEW YORK FOUNDATION FOR THE ARTS, INC.				
	Name change	Doing Business As		23-7	7129564	
Ļ	Initial return		m/suite	E Telephone numbe	ər	
L	Termin- ated	20 JAY STREET 740)	212-	<u>-366-6900</u>	
╞	Amende return	City or town, state or country, and ZIP + 4		G Gross receipts \$	11,036,	115.
L	Applica- tion pending	BROOKLIN, NY 11201		H(a) Is this a group		
		F Name and address of principal officer MICHAEL ROYCE		for affiliates?	Yes L	X No
		SAME AS C ABOVE		H(b) Are all affiliates in	cluded? Yes	No
		npt status: X 501(c)(3) 501(c) ()	527	If "No," attach	a list. (see instructio	ons)
		HTTP://WWW.NYFA.ORG		H(c) Group exemption		
	- 1	rganization: X Corporation Trust Association Other ► Summary	L Year o	of formation: 1971	M State of legal dom	icile: NY
	1 B	riefly describe the organization's mission or most significant activities. TO EMPO	WER	ARTISTS AT	CRITICAL	,
Activities & Governance				SCHEDULE O		
ř	2 C	theck this box if the organization discontinued its operations or disposed of	of more	than 25% of its net a	issets.	
Š		lumber of voting members of the governing body (Part VI, line 1a)				20
<u>ت</u>	1	lumber of independent voting members of the governing body (Part VI, line 1b)		4		20
es	5 T	otal number of individuals employed in calendar year 2010 (Part V, line 2a)		5		35
Ϋ́Ε		otal number of volunteers (estimate if necessary)		6		25
∖cti		otal unrelated business revenue from Part VIII, column (C), line 12	_	7a		0.
_	b N	et unrelated business taxable income from Form 990-T, line 34		7b		0.
				Prior Year	Current Ye	ar
<u>o</u>	8 C	contributions and grants (Part VIII, line 1h)		6,501,377	9,442,	585.
Revenue	9 P	rogram service revenue (Part VIII, line 2g)		610,533.	761,	107.
ě	10 Ir	evestment income (Part VIII, column (A), lines 3, 4, and 7d)		-17,262		202.
	1	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		55,512		549.
	i .	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,150,160		
	1	irants and similar amounts paid (Part IX, column (A), lines 1-3)		5,581,156		
		enefits paid to or for members (Part IX, column (A), line 4)		0,		0.
ģ		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,682,263		668.
Expenses		rofessional fundraising fees (Part IX, column (A), line 11e)		0.		0.
ĝ		otal fundraising expenses (Part IX, column (D), line 25) 504,545	. $ extstyle ext$			
ωũ	17 0	ther expenses (Part X, Column (A), lines 11a-11d, 11f-24f)	-	829,621.	855,	465.
	18 T	otal expenses Add lines 13:17 must equal Part IX, column (A), line 25)		8,093,040.		
	19 R	evenue less expenses. Subtract line 18 from line 12		-942,880.		845.
ces		evenue less lexpenses. Subtract line 18 from line 12	Bed	inning of Current Year	1	
sets	20 T			4,199,380.		
Net Assets or Fund Balances	21 T	otal liabilities (Pair X line 26)		651,315		553.
<u>컆</u>	22 N	et assets or fund balances Subtract line 21 from line 20		3,548,065		807.
Pa	art II	Signature Block				
Und	er penaltı	es of perjury, I declare that I have examined this return, including accompanying schedules and	stateme	ents, and to the best of r	ny knowledge and be	lief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of which p	reparer	has any knowledge.		
	- 1	Men KAR				
Sign	ո ქ	Signature of officer		Date		
Her	e j	MICHAEL ROYCE, EXECUTIVE DIRECTOR				
		Type or print name and title				
	F	Print/Type preparer's name Preparer's ignature	D	ate Check	PTIN	
Paid	L	FREDERICK MARTENS	- ,	5/8/12 sett-emplo	yed	
Prep	arer [F	irm's name LUTZ AND CARR, CPAS LLP	•	Firm's EIN		
Use		irm's address 300 EAST 42ND STREET				
		NEW YORK, NY 10017		Phone no. 2	212-697-22	199
May	the IRS	S discuss this return with the preparer shown above? (see instructions)			X Yes	No

Part III Statement of Program Service Accomplishments Cheek Steedule Occutang a response to any question in the Part III ▼ Buefly describe the organization's meason THE NEW YORK FOUNDATION FOR THE ARTS! (NYFA) MISSION IS TO EMPOWER ARTISTS AT CRITICAL STAGES IN THEIR CREATIVE LIVES. NYFA ACCOMPLISHES THIS BY OFFERING FINANCIAL ASSISTANCE AND INFORMATION TO ARTISTS AND ORGANIZATIONS THAT DIRECTLY SERVE ARTISTS. BY SUPPORTING ARTS Of the organization canase conducting, or make applicant changes in how it conducts, any program services?		990 (2010) NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 Page 2
1 Breity describe the organization's mission' THE NEW YORK FOUNDATION FOR THE ARTS' (NYFA) MISSION IS TO EMPOWER ARTISTS AT CRITICAL STAGES IN THEIR CREATIVE LIVES. NYFA ACCOMPLISHES THIS BY OFFERING FINANCIAL ASSISTANCE AND INFORMATION TO ARTISTS AND ORGANIZATIONS THAT DIRECTLY SERVE ARTISTS, BY SUPPORTING ARTS Old the organization undersides are specificant program services during the year which were not listed on the prior Form 500 or 990 E2? If year, discarble heres new seconds on Schedule O Old the organization cases conducting, or make spinificant changes in how it conducts, any program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(g)(1) tusts are required to inport the amount of grants and splications to others, the tells expenses, and receives, analy, for each organization or sport of grants and splications to others, the tells expenses, and processes, and p	Pa	
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2 Did the organization undertakle any significant program services during the year which were not listed on the prior from 900 or 900-52. If Yea, 'describe these new services on Schedule 0. Old the organization cease conducting, or make significant changes in how it conducts, any program services?		
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4e Total program service expenses ► 8 , 3 4 7 , 0 8 8 . Form 990 (2010)	Tu	
Form 990 (2010)	4e	
32002		Form 990 (2010)

Pa	rt 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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	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? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		х
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? If "Yes," complete Schedule D, Part IV	9		$ \mathbf{x} $
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	,		
	If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а				
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d				
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		

			Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
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? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	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? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	·		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	İ		
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			Ì
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	_36_	<u> </u>	X
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? If "Yes," complete Schedule R, Part VI	37		X
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	X	<u> </u>

Form **990** (2010)

Form **990** (2010)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>	<u>-</u> -	ugo o
<u> </u>	Check if Schedule O contains a response to any question in this Part V			$\overline{}$
	Oncok ii Concade C contains a response to any question in this r art v			ليا
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
1a				
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	<u>1c</u>		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 35			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2b	<u> </u>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	, , , , , , , , , , , , , , , , , , ,	3a	ļ	X
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_	ļ	 -
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)?	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	i		
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b		X
С	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		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).		1	}
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	↓
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		i	
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			ŀ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>	<u> </u>	1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		Ì	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	<u> </u>	ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	ļ
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a		ļ	1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ļ	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them) 11b		ŀ	
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.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

032005 12-21-10 Form 990 (2010) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sec</u>	tion 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 2		}	Ì
b	Enter the number of voting members included in line 1a, above, who are independent 1b 2	<u>0</u>		
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_		X_
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u> _
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	-	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	x	
h	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0	1	
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ŀ	x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	The second secon		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
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	X	
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	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			ł
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	ļ
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			İ
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
16	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
ıoa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		\mathbf{x}_{\perp}
L	taxable entity during the year?	16a	1	 ^ -
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	and the second s	16b	Ì	
Sec	exempt status with respect to such arrangements?	100	'	
17	List the states with which a copy of this Form 990 is required to be filed ▶NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availab	e for		
	public inspection. Indicate how you make these available Check all that apply.	J , J ,		
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation:	-	
	MICHAEL ROYCE - 212-366-6900			
	20 JAY STREET, SUITE 740, BROOKLYN, NY 11201			
		C	000	(0040)

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Form	990	(2010)	

NEW YORK FOUNDATION FOR THE ARTS, INC.

23-7129564

Page

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization r	or any related	orga	nıza	tion	001	npe	nsat	ed any current officer, o	irector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average				itior			Reportable	Reportable	Estimated
	hours per	(cl	heck	all	that	арр	ly)	compensation	compensation	amount of
	week (describe	içe:			1			from the	from related organizations	other compensation
	hours for	or dir			ļ	ted		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		, n	bens		(W-2/1099-MISC)	(2)	organization
	organizations	ual fri	Sonal		ploye	t com	١.			and related
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
J. WHITNEY STEVENS					\vdash					
CHAIR	10.00	X		X	<u> </u>			0.	0.	0.
HOWARD ROTHMAN										
VICE CHAIR	10.00	X		X			<u> </u>	0.	0.	0.
JOHN. F. WILLIAMS II										
TREASURER	10.00	X		X				0.	0.	0.
MARGRET LOUIS					ŀ					
SECRETARY	5.00	X		X	_			0.	0.	0.
KATHLEEN O'GRADY			ŀ	ļ				ļ		
BOARD MEMBER	10.00	X			ļ	<u> </u>	<u> </u>	0.	0.	0.
MARGARET C. AYERS	1		1			Ì				
BOARD MEMBER	2.00	X			<u> </u>	<u> </u>		0.	0.	0.
MARNIE BLACK			}		1			_	_	_
BOARD MEMBER	1.00	X	<u> </u>		_	<u> </u>		0.	0.	0.
JUDITH K. BRODSKY					1		1			
BOARD MEMBER	2.00	X	<u> </u>		<u> </u>	 	_	0.	0.	0.
ANITA DURST	0.00					Ì	}			
BOARD MEMBER	2.00	X			┝	ļ		0.	0.	0.
PATRICIA ERICKSON	1 00		ļ	l	ļ	ļ				
BOARD MEMBER	1.00	X	_		-	-		0.	0.	0.
MASON GRANGER	1 00								0	
BOARD MEMBER	1.00	^	<u> </u>		-	├	<u> </u>	0.	0.	0.
KARL KELLNER	2.00	v	ĺ	ŀ				0.	0.	0.
BOARD MEMBER	2.00	^	-	 	├-	├	-	0.		<u> </u>
NATHAN LYONS	1.00	v						0.	0.	0.
BOARD MEMBER MARJORIE W. MARTAY	1.00	^	-			-	-	0.		
BOARD MEMBER	1.00	~		İ	l			0.	0.	0.
DAVID S.E. NOBLE	1.00	^			 	 				
BOARD MEMBER	1.00	y			[0.	_ 0.	0.
PAULANNE QUEEN	1.00	TA T		 	1		-	 		
BOARD MEMBER	1.00	x						0.	0.	0.
CAROL ROSS		 -			T	 	<u> </u>			<u> </u>
BOARD MEMBER	2.00	$ _{\mathbf{X}}$						0.	_0.	0.
			-					<u> </u>		Form 990 (2010)

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Part VII Section A. Officers, Directors, Tr									ees (continued)	J 0 1		ige o
(A)	(B)			(((D)	(E)		(F)	
Name and title	Average hours per	(cl	Position Reportable Report (check all that apply) compensation comper		Reportable compensation	an	timate nount o	-				
•	week (describe hours for related organizations in Schedule O)	Individual trustee or director			Key employee	Highest compensated employee Former		the organization	from related organizations (W-2/1099-MISC)	com fr org and	other pensate om the anization d relate	e on ed
DAVE SCHROEDER									_			_
BOARD MEMBER	2.00	X			<u> </u>			0.	0.			0.
MARJORIE CROES SILVERMAN							1			ļ		_
BOARD MEMBER	1.00	X			<u> </u>			0.	0.			0.
GEOFF VULETTA		•				ļ		_	_			_
BOARD MEMBER	1.00	X					ļ	0.	0.			0.
SHANA C. WATERMAN								Ì				
BOARD MEMBER	2.00	X			<u> </u>		<u> </u>	0.	0.			0.
ELIZABETH YEE												
BOARD MEMBER	1.00	X				<u> </u>		0.	0.	L		0.
MICHAEL ROYCE										ļ		
EXECUTIVE DIRECTOR	50.00	<u> </u>		X				239,163.	0.	1	0,0	<u>46.</u>
SEBI VITALE				ŀ	ļ	ŀ				1		
DIRECTOR OF FINANCE	50.00			X		L	L	73,620.	0.			0.
MARK ROSSIER												
DEPUTY_DIRECTOR	50.00					X	L	109,035.	0.		6,0	<u>11.</u>
SUSAN BALL										1		
DIRECTOR OF PROGRAMS	50.00					X		106,891.	0.		3,9	
1b Sub-total								528,709.	0.	2	0,0	<u>42.</u>
c Total from continuation sheets to Part \	/II, Section A							0.	_0.			0.
d Total (add lines 1b and 1c)								528,709.	0.	2	0,0	42.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bove	e) wi	ho re	eceived more than \$100),000 in reportable			
compensation from the organization												3
											Yes	No
											162	NO

line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

	Compensation
NEW WEBSITE DEVELOPMENT	141,550
	•

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\$100,000 in compensation from the organization

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	All other organizations must comp				
	not include amounts reported on lines 6b, 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	3,345,044.	3,345,044.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	3,397,001.	3,397,001.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	}			
	See Part IV, lines 15 and 16	80,420.	80,420.		
4	Benefits paid to or for members	"			
5	Compensation of current officers, directors,				
	trustees, and key employees	373,135.	82,145.	144,720.	146,270.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,119,137.	811,615.	168,814.	138,708.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	17,096.	13,505.	3,115.	476.
9	Other employee benefits	110,318.	66,870.	22,057.	21,391.
10	Payroll taxes	119,982.	71,990.	25,195.	22,797.
11	Fees for services (non-employees)				
	Management				
	Legal				
	Accounting	36,642.	23,102.	5,177.	8,363.
	Lobbying	30/0120	23/1021	<u> </u>	<u></u>
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other				
12	Advertising and promotion	2,700.	5.	2,695.	
13	Office expenses	35,784.	22,779.	5,830.	7,175.
14	Information technology	33,704.		3,030.	1,110.
15	Royalties				
16	Occupancy	286,030.	161,860.	65,648.	58,522.
17	Travel	50,500.	29,034.	21,013.	453.
18	Payments of travel or entertainment expenses	30,300.	49,034.	21,013.	455•
10	. ,				
40	for any federal, state, or local public officials Conferences, conventions, and meetings	24,188.	623.	22 565	
19	Interest	24,100.	043.	23,565.	
20	· · ·			-	
21	Payments to affiliates	102 001	115 200	25 000	A1 71 A
22	Depreciation, depletion, and amortization . Insurance	182,881. 17,489.	115,269. 11,024.	25,898. 2,471.	41,714.
23	Other expenses. Itemize expenses not covered	17,409.	11,024.	4,4/1.	3,994.
24	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.)				
а	EQUIPMENT RENTAL/REPAIR	87,537.	52,491.	19,870.	15,176.
b	PROJECT PRODUCTION COST	61,812.	35,073.	17,010.	26,739.
	CC & BANK CHARGES	23,908.	12,954.	7,219.	3,735.
c d	HOSPITALITY	12,289.	6,292.	4,524.	1,473.
- -	PROFESSIONAL DEVELOPMEN	5,854.	435.	3,109.	2,310.
e f	All other expenses	27,851.	7,557.	15,045.	
•		9,417,598.			5,249.
25	Total functional expenses. Add lines 1 through 24f	7,41/,598·	8,347,088.	565,965.	504,545.
26	Joint costs. Check here 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				Form 990 (2010)

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Par		balance Sneet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	148.	1	928,716.
	2	Savings and temporary cash investments	1,441,434.	2	2,062,611.
	3	Pledges and grants receivable, net	227,035.	3	416,360.
	4	Accounts receivable, net		4	
	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)		6	
ets	7	Notes and loans receivable, net	· · · · · · · · · · · · · · · · · · ·	7	
Assets	8	Inventories for sale or use	-	8	
`	9	Prepaid expenses and deferred charges	6,028.	9	24,766.
	10a	Land, buildings, and equipment: cost or other	0,020.		217700
		basis. Complete Part VI of Schedule D 10a 1,294,045.		1	
	ь	Less accumulated depreciation 10b 544,995.	706,090.	10c	749,050
ĺ	11	Investments - publicly traded secunties	1,781,167.	11	1,557,379
	12	Investments - other securities. See Part IV, line 11	27,027207.	12	1,551,515
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	·
	15	Other assets. See Part IV. line 11	37,478.	15	37,478
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,199,380.	16	5,776,360.
	17	Accounts payable and accrued expenses	130,911.	17	137,445
İ	18	Grants payable	227,047.	18	891,861
	19	Deferred revenue	227 / 0 17 .	19	0,51,001
Ì	20	Tax-exempt bond liabilities		20	
_ω	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Iție	22	Payables to current and former officers, directors, trustees, key employees,			
Liabilities		highest compensated employees, and disqualified persons Complete Part II			
ڌ		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	-	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	293,357.	25	328,247.
	26	Total liabilities. Add lines 17 through 25	651,315.	26	1,357,553
		Organizations that follow SFAS 117, check here X and complete	93273131	-	1,001,000.
y		lines 27 through 29, and lines 33 and 34.			
Fund Balances	27	Unrestricted net assets	1,048,115.	27	923,850.
alai	28	Temporarily restricted net assets	1,912,862.	28	2,797,869.
20		Permanently restricted net assets	587,088.	29	697,088.
5		Organizations that do not follow SFAS 117, check here and	307,0001		037,7000
5		complete lines 30 through 34.			
13	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or		Retained earnings endowment accumulated income or other funds		32	
ž		Total net assets or fund balances	3,548,065.	33	4,418,807.
		Total liabilities and net assets/fund balances	4,199,380.	34	5,776,360.

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orm	990 (2010) NEW YORK FOUNDATION FOR THE ARTS, INC.	23-	7129	564	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets		_			
	Check if Schedule O contains a response to any question in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1.0	, 28	8,4	<u>43.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	9	, 41	7,5	98.
3	Revenue less expenses. Subtract line 2 from line 1	3		87	0,8	45.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	,54	B,0	65.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-1	03.
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	4	, 41	8,8	07.
Pa	t 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 X Accrual Other					
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in Schedule	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?		1	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	ĺ			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	. [
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both.		l			
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Auc	lit			
	Act and OMB Circular A-133?	-		3а		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	rt			
	or guidte explain why in Schodule Condidensity and standard to understand and addition			26		

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

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

Open to Public Inspection

Name of the organization

Employer identification number

D -		D	NEW YOR	RK_FOUNDATION	FOR	THE A	RTS,	<u>INC.</u>		2	<u>3-7129564 </u>
	rt I			r ity Status (All organiz					tructions.		
he	organi	zation is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox)			
1	\square	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in s e	ction 170	(b)(1)(A)(i)).		
2		A school des	cribed in section 1	70(b)(1)(A)(ıi). (Attach Sc	hedule E)						
3	Ш	A hospital or	a cooperative hosp	ital service organization (described	i⊓ section	170(b)(1)	(A)(iii).			
4		A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital's name,
		city, and stat	:e:								
5		An organizati	on operated for the	benefit of a college or u	niversity ov	wned or or	perated by	a governi	mental uni	t describe	ed in
		section 170	(b)(1)(A)(iv). (Compl	ete Part II)							
6		A federal, sta	ate, or local governm	nent or governmental uni	t described	d in sectio	n 170(b)(1)(A)(v).			
7	\mathbf{X}			ceives a substantial part					or from the	general i	oublic described in
			b)(1)(A)(vi). (Comple				J			•	
8		A community	trust described in :	section 170(b)(1)(A)(vi).	(Complete	Part II)					
9				ceives: (1) more than 33			rom contri	butions, n	nembershi	p fees. ar	nd aross receipts from
				nctions - subject to certa							
				axable income (less sect							
			509(a)(2). (Complet			,			,		,
10		An organizati	on organized and o	perated exclusively to te	st for publ	ıc safety. S	See sectio	n 509(a)(4	4).		
11				perated exclusively for th						v out the	purposes of one or
				ations described in secti		-				-	•
				organization and compl				•	•		
		a Type I	l b _	Type II	тур	e III - Fund	tionally int	tegrated		d 🗀	Type III - Other
е		By checking	this box, I certify the	at the organization is not			-	_	r more dis	qualified i	persons other than
				than one or more publicly							
f				tten determination from t							,
			rganization, check t								
g		Since August	t 17, 2006, has the	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing per	sons?	
		(i) A person	n who directly or inc	directly controls, either al	one or tog	ether with	persons o	lescnbed :	ın (ıı) and (ııı) below,	Yes No
		the gove	erning body of the s	upported organization?						_	11g(i)
		(iı) A famıly	member of a perso	n described in (i) above?							11g(ii)
		(iii) A 35% d	controlled entity of a	a person described ın (i) d	or (ii) above	97					11g(iii)
h		Provide the fo	ollowing information	about the supported or	ganizationi	(s).					
(i)	Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	rganization	(v) Did you	notify the	(vi) ls		(vii) Amount of
.,		nization	(,	organization (described on lines 1-9		sted in your	organizat		organization (i) organiz	on in col. ed in the	support
				above or IRC section	governing	document?	(i) of you	support?	U.S	.?	••
				(see instructions))	Yes	No	Yes	No	Yes	No	
											 .
										1 T	
]	
]	
				<u> </u>	ļ						
									<u> </u>	ļļ	- · ·- ·-
` ^ +^											

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Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 Page 2

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

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

Sec	ction A. Public Support						
Cale	ndar 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.")	9058067.	10531801.	7557905.	6501377.	9442585.	43091735.
2	Tax revenues levied for the organ-						
	ızatıon'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	9058067.	10531801.	7557905.	6501377.	9442585.	43091735.
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		ŀ				
	amount shown on line 11,						
	column (f)						7882638.
	Public support. Subtract line 5 from line 4		·				35209097.
Sec	ction B. Total Support		·		,		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4 .	9058067.	10531801.	7557905.	6501377.	9442585.	43091735.
8	Gross income from interest,						
	dividends, payments received on		}				
	secunties loans, rents, royalties						
	and income from similar sources	232,491.	333,611.	169,544.	17,448.	58,539.	811,633.
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.)	541.	32,485.	40,872.	55,512.	26,015.	155,425.
11	Total support. Add lines 7 through 10						44058793.
12	•	·					3,663,670 .
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	
<u> </u>	organization, check this box and stop						▶
	ction C. Computation of Publ						
	Public support percentage for 2010 (I			column (f))		14	79.91 %
	Public support percentage from 2009	•	•			15	86.98 %
16a	33 1/3% support test - 2010. If the o				14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies						▶ [X]
b	33 1/3% support test - 2009. If the o	•			line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual		_				. ▶□
1/a	10% -facts-and-circumstances test						
	and if the organization meets the "fac					rt IV how the orga	nization
	meets the "facts-and-circumstances"				-		▶□
þ	10% -facts-and-circumstances test	-			· · · · · · · · · · · · · · · · · · ·	· ·	
	more, and if the organization meets the						e
	organization meets the "facts-and-circ		_				▶⊨
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t		•	
					Sche	edule A (Form 990	or 990-EZ) 2010

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

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

Section A. Public Support	below, picase com	pieto i dictif			_ 		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	2010	(f) Total
1 Gifts, grants, contributions, and							
membership fees received. (Do not			1		ļ	1	
include any "unusual grants.")							
2 Gross receipts from admissions,							
merchandise sold or services per-					1	ŀ	
formed, or facilities furnished in any activity that is related to the					i		
organization's tax-exempt purpose					İ		
3 Gross receipts from activities that				·			
are not an unrelated trade or bus-						1	
iness under section 513						1	
4 Tax revenues levied for the organ-		 					
ization's benefit and either paid to							
or expended on its behalf					ļ	Ī	
5 The value of services or facilities							
furnished by a governmental unit to							
the organization without charge		1				\	
6 Total. Add lines 1 through 5				 			
7a Amounts included on lines 1, 2, and		+	<u> </u>	 			
3 received from disqualified persons					İ]	
b Amounts included on lines 2 and 3 received	<u> </u>	 		 	 		
from other than disqualified persons that							ı
exceed the greater of \$5,000 or 1% of the							
amount on line 13 for the year		 	 	 	<u> </u>		
c Add lines 7a and 7b		 	 	 	 		
8 Public support (Subtract line 7c from line 6) Section B. Total Support		<u> </u>	.1	<u> </u>	<u> </u>		
	(=) 2006	(h) 2007	(=) 2008	(4) 2000	(-)	2010	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e)	2010	(i)_iotai
10a Gross income from interest,				 	 		
dividends, payments received on							ı
securities loans, rents, royalties							
and income from similar sources				ļ			
b Unrelated business taxable income					\		ı
(less section 511 taxes) from businesses	j [ı
acquired after June 30, 1975	<u> </u>	<u> </u>					
c Add lines 10a and 10b					ļ		
11 Net income from unrelated business	ا د	+					:
activities not included in line 10b, whether or not the business is					1		ı
regularly carned on							
12 Other income. Do not include gain							
or loss from the sale of capital assets (Explain in Part IV)			<u> </u>		<u> </u>		
13 Total support (Add lines 9, 10c, 11, and 12)							
14 First five years. If the Form 990 is for	or the organization	's first, second, the	rd, fourth, or fifth t	ax year as a section	on 501(c)	(3) organiz	ation,
check this box and stop here			··	-			
Section C. Computation of Pub	lic Support Pe	ercentage					
15 Public support percentage for 2010	(line 8, column (f)	divided by line 13,	column (f))		15		
16 Public support percentage from 200	9 Schedule A, Par	t III, line 15	· · · · ·	·	16		
Section D. Computation of Inve	estment Incom	ne Percentage					
17 Investment income percentage for 2	010 (line 10c, colu	ımn (f) dıvıded by İ	ne 13, column (f))		17		
18 Investment income percentage from	1 2009 Schedule A	, Part III, line 17			18		
19a 33 1/3% support tests - 2010. If th	e organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%,	and line 1	7 is not
more than 33 1/3%, check this box	-		•				▶□
b 33 1/3% support tests - 2009. If th						 33 1/3% . :	and
line 18 is not more than 33 1/3%, ch							▶□
20 Private foundation. If the organization		•	•		-	_	
932023 12-21-10			,				0 or 990-EZ) 20
				301	^	(· -:::: 00	

032023 12-21-10

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.

2010
Open to Public Inspection

Name of the organization

NEW YORK FOUNDATION FOR THE ARTS, INC.

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	idvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of		
,	ımpermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e g, recreation or e	education) Preservation of an hi	stoncally important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by th	e organization during the tax
	year >		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per	- · · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservation easements r	•	. Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
Day	conservation easements. rt III Organizations Maintaining Collections o	Ant Historical Transcript and	Nils - Circilo Assaul
Га			Aner Similar Assets.
	Complete if the organization answered "Yes" to Form		
ıa	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ext		ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
D	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	iblic 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	•	. \$
2	If the organization received or held works of art, historical tree		al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items.	
a	Revenues included in Form 990, Part VIII, line 1	·· ·· ··· ··	\$
b	Assets included in Form 990, Part X		. • \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 NEW YOR	K FOUNDATION	ON FOR THE	ARTS. II	NC.	2	3-71	29564	Page 2
	t III Organizations Maintaining C								
3	Using the organization's acquisition, accessi								
	(check all that apply):		•	•	·				
а	Public exhibition	d	Loan or excl	hange programs					
ь	Scholarly research	e	Other	g- pg					
c	Preservation for future generations	•							
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organization's	exemo	nt numos	e in Par	t XIV.	
5	During the year, did the organization solicit o								
	to be sold to raise funds rather than to be ma				· · · · · · · · · · · · ·	300.0		Yes	☐ No
Pai	t IV Escrow and Custodial Arran				" to Fo	rm 990.	Part IV.		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other assets	not in	cluded			
	on Form 990, Part X?		,				-	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	llowing table.		•				
			g					Amount	
С	Beginning balance					1c			
	Additions during the year		• •	•	•	1d		•	
e	Distributions during the year		•••	•	•••	1e			
f	Ending balance		• •	•	• •	1f			
2a	Did the organization include an amount on Fe	orm 990. Part X. line	21?		••			Yes	No
b	If "Yes," explain the arrangement in Part XIV	, ,	_ · · ·		•				
Par	rt V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part IV, I	ne 10.				
		(a) Current year	(b) Prior year	(c) Two years ba) Three ye	ars back	(e) Four	ears back
1a	Beginning of year balance	507,165,	763,483,	929.5					
b	Contributions	118 311.	1.043.						
С	Net investment earnings, gains, and losses	3,836.	4.139.	-161.5	23.				
d	Grants or scholarships	11,000.	11,500.	4.5					
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses		250,000,				_		
g	End of year balance	618,312.	507,165.	763.4	83.			1	
2	Provide the estimated percentage of the year					-			
а	Board designated or quasi-endowment		%						
b	Permanent endowment ► 100.00	%							
С	Term endowment	 %							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered	for the	organiza	tion		
	by [.]								res No
	(i) unrelated organizations							. 3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Schedule R?					3b	
4	Describe in Part XIV the intended uses of the			<u> </u>					
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10						
	Description of investment	(a) Cost or of		or other (c) Acc	umulated		(d) Book	value
		basis (investr	nent) basis	(other)	depre	ciation			
1a	Land								
b	Buildings								
С	Leasehold improvements		60	2,142.	14	12,15	7.	459	,985.
d	Equipment .		69	1,903.	4(12,83	8.	289	,065.
<u>е</u>	Other								
Total	Add lines 1a through 1e (Column (d) must e	qual Form 000 Port	V column (D) line 1	0(a))				7/10	050

Schedule D (Form 990) 2010

	dule D (Form 990) 2010 NEW YORK FOUNDATION FOR THE ARTS, INC. † XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	23-7129564 Page 4 tements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	10,288,443.
2	Total expenses (Form 990, Part IX, column (A), line 25)	9,417,598.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	870,845.
4	Net unrealized gains (losses) on investments 4	-103.
5	Donated services and use of facilities 5	
6	Investment expenses 6	
7	Prior period adjustments 7	
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	-103.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	870,742.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	
1	Total revenue, gains, and other support per audited financial statements	1 10,288,340.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 20/200/3100
a	Net unrealized gains on investments 2a -103	
b	Donated services and use of facilities 2b	-
		-
c	· · · · · · · · · · · · · · · · · · ·	
d	· · · · · · · · · · · · · · · · · · ·	-103.
	Add lines 2a through 2d	10.000
3	Subtract line 2e from line 1	3 10,288,443.
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	
þ	Other (Describe in Part XIV) 4b	\dashv . \mid
	Add lines 4a and 4b	4c U.
<u>5</u>	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5 10,288,443.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	
1	Total expenses and losses per audited financial statements	1 9,417,598.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	-
þ	Prior year adjustments	
С	Other losses	_
d	Other (Describe in Part XIV)	-
е	Add lines 2a through 2d	2e 0.
3	Subtract line 2e from line 1	3 9,417,598.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	_
þ	Other (Describe in Part XIV)	
C	Add lines 4a and 4b	4c 0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 9,417,598.
Pai	t XIV Supplemental Information	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines	s 1b and 2b, Part V, line 4; Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any a	additional information
<u>PAI</u>	RT V, LINE 4: NYFA'S ENDOWMENT FUNDS ARE AS FOLLOWS:	
1.	GERI ASHUR AWARD FUND	
TH.	IS FUND SUPPORTS A BIENNIAL AWARD IN SCREENWRITING.	
<u>2.</u>	CONCORDIA FOUNDATION CAREER ADVANCEMENT AWARD FUND	
TH.	S FUND SUPPORTS ANNUAL AWARDS TO ADVANCE ARTISTS' CAREER	lS.
<u>3.</u>	THE BUDDY FELLOWSHIP FUND	
TH:	IS FUND SUPPORTS ANNUAL AWARDS TO A FEMALE ARTIST.	
4.	THE CANADIAN WOMEN'S CLUB	
		Schedule D (Form 990) 2010
03205	4 10	

Schedule D (Form 990) 2010 NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 Page 5 Part XIV Supplemental Information (continued)
THIS FUND SUPPORTS ANNUAL AWARDS TO A FEMALE CANADIAN CITIZEN ATTENDING AN
EDUCATIONAL INSTITUTION FULL-TIME IN THE NEW YORK TRI-STATE AREA.
DOCKTIONAL INDITION FULL-TIME IN THE NEW TORK TRI-STATE AREA:
PART X, LINE 2: NYFA IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM
FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE
AND HAS BEEN DESIGNATED AS AN ORGANIZATION WHICH IS NOT A PRIVATE
FOUNDATION. MANAGEMENT HAS EVALUATED ALL INCOME TAX POSITIONS AND
CONCLUDED THAT NO DISCLOSURES RELATING TO UNCERTAIN POSITIONS WERE
REQUIRED IN THE FINANCIAL STATEMENTS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047
2010
ZU IU
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

NEW YORK FOUNDA	TION FOR	THE ART	'S. TNC.		23-71295	5.4
Part I General Info	rmation on A	ctivities Ou	tside the United States. Compl	ete if the organ	zation answered '	'Yes"
to Form 990, Par						
 For grantmakers. Does 	the organization	maintain recor	ds to substantiate the amount of the gi	rants or assista		
grantees' eligibility for th	ne grants or assis	stance, and the	selection critena used to award the gra	ants or assistan	ce? X	Yes No
2 For grantmakers. Desc	nbe in Part V the	e organization's	procedures for monitoring the use of g	rant funds outs	ide the United Sta	ites
3 Activities per Region (Ti	he following Part	I, line 3 table c	an be duplicated if additional space is i	needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	ıs a prog describe	rty listed in (d) iram service, specific type e(s) in region	(f) Total expenditures for and investments in region
EUROPE (INCLUDING			GRANTS TO RECIPIENTS			
ICELAND & GREENLAND)	0	0	LOCATED IN REGION			36,420.
			GRANT TO ONE RECIPIENT			
SOUTH AMERICA	0	0	LOCATED IN REGION			40,000.
EAST ASIA AND THE			GRANT TO ONE RECIPIENT			
PACIFIC	0	0	LOCATED IN REGION			4.000.
	,					
					·	
3 a Sub-total						
b Total from continuation	0	0				80,420.
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				80,420.
LHA For Paperwork Reduct	ion Act Notice,	see the Instruc	tions for Form 990.		Schedule F	(Form 990) 2010

032071 12-20-10

26

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27

Schedule F (Form 990) 2010

Enter total number of other organizations or entitles

3

23-7129564

NEW YORK FOUNDATION FOR THE ARTS, INC.

Schedule F (Form 990) 2010

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.

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	ance (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	. (h) Method of valuation (book, FMV, appraisal, other)
ARTIST FUND	EUROPE (INCLUDING ICELAND & GREENLAND)	ဗ	36,420,	WIRE	0		
ARTIST FUND	SOUTH AMERICA			WIRE	C		
ARTIST FUND	EAST ASIA AND THE PACIFIC	- -1	4,000,WIRE	MIRE	o		
							•
						Schedu	Schedule F (Form 990) 2010

Schedule F (Form 990) 2010

Yes X No

for Form 5713)

Schedule F (Form 990) 2010 NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 Page 5 Part V Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method), Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
SCHEDULE F, PART I, LINE 2: PROSPECTIVE GRANTEES ARE REQUIRED TO SUBMIT
AN APPLICATION DESCRIBING THEIR PROJECT AND THE USE OF GRANT FUNDS
TOWARDS THE PROJECT. GRANTEES ARE REQUIRED TO PROVIDE A FINAL REPORT
DESCRIBING THE PROJECT OUTCOME AND USE OF THE GRANT FUNDS TOWARDS THE
PROJECT. IF A FINAL REPORT IS NOT SUBMITTED, ADDITIONAL GRANT FUNDS WILL
NOT BE PROVIDED, UNTIL NYFA RECEIVES A FINAL REPORT.
SCHEDULE F, PART I, LINE 3: GRANT EXPENSE WAS RECORDED USING THE ACCRUAL
METHOD OF ACCOUNTING.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Inspection ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number 23-7129564 NEW YORK FOUNDATION FOR THE ARTS, Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants h Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid (iii) Did undraiser (vi) Amount paid (i) Name and address of individual to (or retained by) (iv) Gross receipts fundraiser have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes No **Total** 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

032081 01-13-11

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

Schedule G (Form 990 or 990-EZ) 2010

INC. 23-7129564 Schedule G (Form 990 or 990-EZ) 2010 NEW YORK FOUNDATION FOR THE ARTS, Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through ANNUAL GALA col. (c)) (event type) (event type) (total number) 255,421. 255,421 Gross receipts 209,981 <u>209,981.</u> 2 Less: Chantable contributions Gross income (line 1 minus line 2) 45,440. 45,440. Cash prizes Noncash prizes Direct Expenses 6 Rent/facility costs 39,330. 39,330 Food and beverages 8 Entertainment 6,110. 6,110. Other direct expenses 45,440 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Combine line 3, column (d), and line 10 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 (d) Total gaming (add (b) Pull tabs/instant Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 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? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain.

Schedule G (Form 990 or 990-EZ) 2010

032082 01-13-11

Schedule G (Form 990 or 990-EZ) 2010 NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 Page 3
11 Does the organization operate gaming activities with nonmembers?
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed
to administer chantable gaming?
a The organization's facility
b An outside facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name ▶
Address >
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
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 of the third party:
Name ▶
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 to be distributed to other exempt organizations or spent in the
organization's own exempt activities during the tax year ▶ \$
Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)
inter 3, 30, 100, 130, 130, 130, 130, and 170, as applicable. Also complete this part to provide any additional information (see instructions)
032083 01-13-11 Schedule G (Form 990 or 990-EZ) 2010
30 Schedule G (Form 990 of 990-EZ) 2010

SCHEDULE! (Form 990) Department of the Treasury Internal Revenue Service

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

Open to Public DMB No 1545-0047 ' Inspection

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

62. Employer identification number å 23-7129564 SRANTS TO ORGANIZATIONS SRANTS TO ORGANIZATIONS SRANTS TO ORGANIZATIONS SRANTS TO ORGANIZATIONS GRANTS TO ORGANIZATIONS GRANTS TO ORGANIZATIONS (h) Purpose of grant OR NEW YORK THEATER FOR NEW YORK THEATER FOR NEW YORK THEATER FOR NEW YORK THEATER OR NEW YORK THEATER OR NEW YORK THEATER or assistance X Yes 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 ROGRAM PROGRAM ROGRAM PROGRAM ROGRAM PROGRAM 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 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 (g) Description of non-cash assistance : (f) Method of valuation (book, FMV, appraisal, other) ં o. o. ᅴ o o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant INC 176,500 125,000 100,000 20,000 81,500 90,000 THE ARTS, (c) IRC section ıf applicable 501(C)(3) 501(C)(3) 501(C)(3) 11-3621605 501(C)(3) 501(c)(3) 501(C)(3) 2 Enter total number of section 501(c)(3) and government organizations FOR NEW YORK FOUNDATION 13-3218253 13-4002491 80-0339038 52-2143843 13-3787877 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization ELEVATOR REPAIR SERVICE THEATER, INC - 138 SOUTH OXFORD ST, #2D 511 WEST 54TH STREET, 2ND FLOOR 138 SOUTH OXFORD STREET., 3C 76 NINTH AVENUE., SUITE 537 ATLANTIC THEATER COMPANY or government ARS NOVA THEATER I, INC BIG DANCE THEATER INC. 80 GREENWICH STREET Name of the organization NEW YORK, NY 10019 303 CLINTON STREET NEW YORK NY 10006 BROOKLYN, NY 11217 NEW YORK, NY 10011 BROOKLYN, NY 11217 3-LEGGED DOG, INC. BROOKLYN, NY 11231 CIVILIANS INC. Part I Part

Enter total number of other organizations

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

Schedule I (Form 990) (2010)

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•		•								
23-7129564 Page 1		(h) Purpose of grant or assistance		GRANTS TO ORGANIZATIONS	FOR NEW YORK THEATER	PROGRAM	GRANTS TO ORGANIZATIONS	FOR NEW YORK THEATER	PROGRAM	
	μI)	(g) Description of non-cash assistance		GRAI	FOR	PROC	GRAD	FOR	PROC	
	edule I (Form 990), Pa	(f) Method of valuation (book, FMV, appraisal, other)	-							
	nited States (Scho	(e) Amount of non-cash assistance				0			0	
RTS, INC.	izations in the U	(d) Amount of cash grant				140,000,			122,000,	
NEW YORK FOUNDATION FOR THE ARTS, INC.	overnments and Organ	(c) IRC section if applicable				501(C)(3)		,	501(C)(3)	
FOUNDATIC	Assistance to Go	(b) EIN				13-3449416 501(C)(3)			13-3779197 501(C)(3)	
Schedule I (Form 990) NEW YORK	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	(a) Name and address of organization or government	номе вов сомпривовару фирапра	THE STATE OF THE S	AKI - HEKE AKIS CENTER, 145 SIXIH	AVE - NEW YORK, NY 10013	LARK THEATRE COMPANY, INC.	311 WEST 43RD STREET,, SUITE 406	NEW YORK, NY 10036	

GRANTS TO ORGANIZATIONS

FOR NEW YORK THEATER

PROGRAM

GRANTS TO ORGANIZATIONS

FOR NEW YORK THEATER

PROGRAM

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501(C)(3)

13-3486145

102,000

501(C)(3)

13-3687725

NATIONAL ASIAN AMERICAN THEATRE CO. INC - 520 8TH AVENUE, SUITE #308 - NEW YORK, NY 10018

MINT THEATER COMPANY 311 WEST 43RD, #307 NEW YORK, NY 10036

OPEN CHANNELS NY, INC DIXON PLACE 161A CHRYSTIE STREET NEW YORK, NY 10002	13-3486263 501(C)(3)	501(C)(3)	85,000,	0	GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
PAGE SEVENTY-THREE PRODUCTIONS INC, - 138 SOUTH OXFORD STREET SUITE #5C - BROOKLYN, NY 11217	13-4059276 501(C)(3)	501(C)(3)	45,000.	0	GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
PERFORMANCE SPACE 122, INC 150 FIRST AVE NEW YORK, NY 10009	13-3522283	501(C)(3)	200,000	0	GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
PREGONES TOURING PUERTO RICAN THEATRE COLLECTION; INC 571-575 WALTON AVE - BRONX, NY 10451	13-3266893 501(C)(3)	501(C)(3)	101,500,	0	GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
SARATOGA INTERNATIONAL THEATER INSTITUTE, INC 520 8TH AVENUE, 3RD FLOOR, SUITE #310 - NEW YORK, NY 10018	13-3730731 501(C)(3)	501(C)(3)	102 000	,0	GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	izations in the Ur	nited States (Sche	dule I (Form 990), Par	(111)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or aşsıstance
SPANISH THEATRE REPERTORY CO. LTD 138 EAST 27TH STREET NEW YORK, NY 10016	13-2672755	501(C)(3)	200,000.	0			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
THE ST. ANN'S WAREHOUSE, INC 55 WASHINGTON STREET SUITE #458 BROOKLYN, NY 11201	11-2665242	501(C)(3)	200,000.	0			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
THE VINEYARD THEATER AND WORKSHOP CENTER, INC 108 EAST 15TH STREET - NEW YORK, NY 10003	13-3904262	501(C)(3)	200,000	0			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
THE WOOSTER GROUP PO BOX 654, CANAL STREET STATION NEW YORK, NY 10013	13-3761711	501(C)(3)	176,500,	o			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
THE WORKING THEATER COMPANY 520 8TH AVENUE SUITE 303 NEW YORK, NY 10018	13-1394732	501(C)(3)	45,000,	0			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
THEATER ET AL, INC. 5-49 49TH AVENUE LONG ISLAND CITY, NY 11101	13-4038993	501(C)(3)	50,000	0			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
WOMENS PROJECT & PRODUCTIONS, INC. 55 WEST END AVENUE #2 NEW YORK, NY 10023	13-3369451	501(C)(3)	126,500,	0			GRANTS TO ORGANIZATIONS FOR NEW YORK THEATER PROGRAM
BIG TREE PRODUCTIONS, INC. 42 HORATIO ST, #9 NEW YORK, NY 10014	13-4200666	501(C)(3)	20,000,	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
BROOKLYN ARTS EXCHANGE 421 FIFTH AVENUE BROOKLYN, NY 11215 LHA	11-3071458	501(C)(3)	10,000.	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM Schedule I (Form 990)

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Schedule I (Form 990) NEW YORK FOUNDATION FOR TH Part II Continuation of Grants and Other Assistance to Governments and	FOUNDATION Assistance to Gover	N FOR THE A	ARTS, INC.	ited States (Sche	E ARTS, INC. Organizations in the United States (Schedule I (Form 990), Part II)		23-7129564 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or aşsıstance
CHEZ BUSHWICK, INC 304 BOERUM STREET #23 BROOKLYN, NY 11206	56-2630951	501(C)(3)	20,000	0			, GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
CORBIN DANCES, INC C/O PATRICK CORBIN 196 WEST 134TH S NEW YORK, NY 10030	\$ 20-3901165	501(C)(3)	10,000,	0.			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
DANZA ESPANA/ASDT INC. 109 WEST 27TH STREET, 8TH FLOOR ATTN: YLOY YBARRA - NEW YORK, NY 10001	13-3399840	501(C)(3)	10 000	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
FRACTURED ATLAS PRODUCTIONS, INC. 248 W 35TH STREET 10TH FLOOR NEW YORK, NY 10001	11-3451703	501(C)(3)	12,500,	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
MAPP INTERNATIONAL PRODUCTIONS 140 SECOND AVE SUITE #502 NEW YORK, NY 10003	13-3757070	501(C)(3)	20,000,	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
MOVING THEATER FDR STATION P.O. BOX 1449 NEW YORK, NY 10150	20-0021714	501(C)(3)	20,000,	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
THE FIELD 161 SIXTH AVENUE, 14TH FL NEW YORK, NY 10013	13-3357408	501(C)(3)	21,925,	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
YIN MEI DANCE 43 RICHARDS ROAD PORT WASHINGTON, NY 11050	12-3700733	501(C)(3)	10,000,	0			GRANTS TO ORGANIZATIONS FOR BUILD PROGRAM
ARTS COUNCIL OF SOUTHERN FINGER LAKES - 32 WEST MARKET STREET - CORNING, NY 14830	16-0999315	501(c)(3)	5, 870,	0			GRANTS TO ORGANIZATION FOR SOS PROGRAM
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Schedule I (Form 990) NEW YORK FOUNDATION FOR THE ARTS, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	FOUNDATIC Assistance to Go	FOUNDATION FOR THE A Assistance to Governments and Organ	ARTS, INC.	ited States (Sche	dule I (Form 990), Pa	2	3-7129564 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTS & CULTURAL COUNCIL FOR GREATER ROCHESTER - 277 N, GOODMAN STREET - ROCHESTER, NY 14607	22-2309669	501(C)(3)	12,378,	0			GRANTS TO ORGANIZATION
EAST END ARTS COUNCIL 133 EAST MAIN STREET RIVERHEAD, NY 11901	11-2285495	501(C)(3)	12,378,	0			GRANTS TO ORGANIZATION FOR SOS PROGRAM
GARRISON ART CENTER 23 GARRISON LANDING P.O. BOX 4 GARRISON, NY 10524	13-6201469	501(C)(3)	7,378,	0			GRANTS TO ORGANIZATION FOR SOS PROGRAM
THE ARTS CENTER OF THE CAPITAL REGION - C/O LAUREN HITTINGER 265 RIVER STREET - TROY, NY 12180	14-1484756	501(C)(3)	12,378,	0			GRANTS TO ORGANIZATION FOR SOS PROGRAM
ADIRONDACK LAKES CENTER FOR THE ARTS - PO BOX 205 - BLUE MOUNTAIN LAKE, NY 12812	14-1501361	501(C)(3)	5,000	0			STATE AND LOCAL PARTNERSHIPS
CHENANGO COUNTY COUNCIL OF THE ARTS - VICTORIA KAPPEL 27 WEST MAIN STREET - NORWICH, NY 13815	22-2187522	501(C)(3)	29,000	0			STATE AND LOCAL PARTNERSHIPS
WESTCHESTER ARTS COUNCIL 31 MAMARONECK AVENUE WHITE PLAINS, NY 10601	13-2604827	501(C)(3)	15,000.	0			STATE AND LOCAL PARTNERSHIPS
CULTURAL RESOURCES COUNCIL JOHN, H, MULROY CIVIC CENTER SYRACUSE, NY 13202	15-0625350	501(C)(3)	17,500.	0			STATE AND LOCAL
PHELPS ARTS CENTER 15 CHURCH STREET PHELPS, NY 14532 LHA	20-5975539	501(C)(3)	. 5,000	0			STATE AND LOCAL PARTNERSHIPS Schedule I (Form 990)

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Schedu	le I (Form 990)	NEW	YORK	FOUNDATION	CON FOR	_	THE A	R'I'S ,	INC.			43
Part II	II Continuation of	Grants a	and Other	Assistance to	Governm	nents an	nd Organ	izations i	in the Uni	Inited States (Sci	edule I (Form 990), Part II.)	
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(a) Name and address of (b) EIN (c) IRC section (d) Amount of organization or government cash grant	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SARATOGA ARTS INC. 320 BROADWAY SARATOGA SPRINGS, NY 12866	14-1632037	501(C)(3)	7,500,	0			, STATE AND LOCAL PARTNERSHIPS
	22-2743917	501(C)(3)	20,000,	0			STATE AND LOCAL PARTNERSHIPS
AN DIE MUSIK 1060 FIFTH AVENUE NEW YORK, NY 10128	13-3345336	501(C)(3)	43,200,	0			GRANTS TO EMERGING ORGANIZATIONS
AMERICAN CENTER FOR MUSICAL ARTS 201 W. 72ND STREET, 3K NEW YORK, NY 10023	13-3961427	501(C)(3)	10,000,	0			GRANTS TO EMERGING ORGANIZATIONS
ART STRIDES, INC. 102 WEST 75TH STREET, GARDEN LEVEL NEW YORK, NY 10023	01-0938170	501(C)(3)	32,484,	0			GRANTS TO EMERGING ORGANIZATIONS
ADARSH ALPHONS PROJECTS 273 BENNETT AVENUE, SUITE 3E NEW YORK, NY 10040	27-3066150	501(C)(3)	6,234,	0			GRANTS TO EMERGING ORGANIZATIONS
BLACK AMERICAN HERITAGE FOUNDATION P.O. BOX 772 MIDDLE ISLAND, NY 11953	22-2715288	501(C)(3)	8,710.	0			GRANTS TO EMERGING ORGANIZATIONS
BALLROOM BASIX USA 178 EAST 117 STREET, SUITE 1B NEW YORK, NY 10035	27-5265003	501(C)(3)	26,242,	0,			GRANTS TO EMERGING ORGANIZATIONS
ESOPUS MUSICALIA P.O. BOX 899 STONE RIDGE, NY 12484 LHA	27-1229419	501(C)(3)	7,625,	0			GRANTS TO EMERGING ORGANIZATIONS Schedule I (Form 990)

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Schedule I (Form 990) NEW YORK FOUNDATION FOR THE ARTS, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	FOUNDATIC Assistance to Go	N FOR THE A	ARTS, INC.	nited States (Sche	dule I (Form 990), Par		23-7129564 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DRUMSONGS PRODUCTIONS, INC. P.O. BOX 340716 ROCHDALE VILLAGE, NY 11434	06-1550859	501(C)(3)	7,360,	0			GRANTS TO EMERGING ORGANIZATIONS
GLOBAL EMPOWERMENT THEATRE 285 CENTRAL PARK WEST NEW YORK, NY 10024	27-4263636	501(C)(3)	19,971,	0			GRANTS TO EMERGING DRGANIZATIONS
HEIDI LATSKY DANCE 400 w. 43RD STREET, #21S NEW YORK, NY 10036	20-4193098	501(C)(3)	19,289,	0			GRANTS TO EMERGING ORGANIZATIONS
INTERNATIONAL NETWORK FOR THE CONSERVATION OF CONTEMPORARY ART - 240 GREENE STREET, STE 406 - NEW YORK, NY 10003	37~1585169	501(C)(3)	36,720.	0			GRANTS TO EMERGING ORGANIZATIONS
THE IMPOSSIBLE MUSIC SESSIONS 276 THIRD AVENUE, #4C NEW YORK, NY 11215	27-1181892	501(C)(3)	. 6, 605	0			GRANTS TO EMERGING ORGANIZATIONS
THE LAUNDROMAT PROJECT 275 MACDONOUGH STREET BROOKLYN, NY 11233	87-0753479	501(C)(3)	29,906,	0			GRANTS TO EMERGING ORGANIZATIONS
MUSIC AND MENTORING HOUSE 14 WEST 121ST STREET NEW YORK, NY 10027	27-3983709	501(C)(3)	. 56, 620	0			GRANTS TO EMERGING ORGANIZATIONS
NP CONTEMPORARY ARTS CENTER 131 CHRYSTIE STREET, GROUND FLOOR NEW YORK, NY 10002	27-3346497	501(C)(3)	8,637.	0			GRANTS TO EMERGING ORGANIZATIONS
PARTHENIA 67-25 47TH AVENUE WOODSIDE, NY 11377 LHA	77-0698322	501(C)(3)	8,780,	0			GRANTS TO EMERGING ORGANIZATIONS Schedule I (Form 990)
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Schedule I (Form 990) NEW YORK FOUNDATION FOR TH. Part II Continuation of Grants and Other Assistance to Governments and	FOUNDATIC Assistance to Go	NEW YORK FOUNDATION FOR THE A	ARTS, INC.	nited States (Sche	E ARTS, INC. Organizations in the United States (Schedule I (Form 990), Part II.)		23-7129564 Page 1	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or aşsıstance	
PIROGUE COLLECTIVE 330 ADECATUR STREET BROOKLYN, NY 11233	27-3970858	501(C)(3)	14,311,	0,0			SRANTS TO EMERGING ORGANIZATIONS	
TEVERETERNO 289 BLEECKER STREET NEW YORK, NY 10014	27-2188731	501(C)(3)	47,479,	0			GRANTS TO EMERGING ORGANIZATIONS	
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							Schedule I (Form 990)	
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Schedule I (Form 990) (2010) NEW YORK FOUNDATION FOR THE ARTS, INC.

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.

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.

(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
ARTISTS' SPONSORED PROJECTS	213	2,361,538,	0		
FELLOWSHIPS	105	727,300,	0,		
ARTIST FUND	86	263.065.	o		
SOS - OPPORTUNITY GRANTS	19	17,193,	0		
DOGC FILM		1 000	C		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	n required in Part I, Is	ine 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: ARTISTS'	S' FELLO	ELLOWSHIPS ARE	ARE CHOSEN BA	BASED ON THE	
RITERION OF WORK	NSTRATES	4	COMPELLING VISION	AS DEFINED	
ASSEMBLED PANEL'S	E OPINION.	N. MATERIALS		ARE REVIEWED AND	
VOTED ON BY THE PANELISTS IN ELIMINATI	II	ON ROUNDS WHICH	PRODUCE	A SMALLER	
RTIST'S	ADVANCEMENT	IS A	PRODUCT OF T	THE COLLECTIVE	
VOTE OF THE PANEL. A SINGLE PANELIST	ST CANNOT	ENSURE	AN APPLICANT'S	r's success	
TRE DANET, PROCEEDINGS ARE	REVIEWED	BY THE AR	ARTISTS' ADV	ADVISORY	
COMMITTEE AND BY NYFA'S BOARD OF TRUSTEES.	RUSTEES.	NEITHER THE		COMMITTEE NOR THE	
BOARD REVIEWS THE WORK OF APPLICANTS	UTS OR MAKES	ANY	AESTHETIC JUDGMENTS	DGMENTS.	(0+00) (000 7) 1 -1 -1 -1 -1 -0
032102 01-13-11		7 15			Schedule I (Form 990) (2010)

Page 2	• •						!		(066
23-7129564 Pa	(f) Description of non-cash assistance	•							Schedule I (Form 990)
	(e) Method of valuation (book, FMV, appraisal, other)								
INC.	(d) Amount of non-	o	0	0,	o	0			
THE ARTS	(c) Amount of cash grant	5 000	7,000.	10,126,	4 679.	100.			
ATION FOR	(b) Number of recipients	3	1,	30,	20.	1			
Schedule I (Form 990) NEW YORK FOUNDATION FOR THE ARTS, INC. Dart III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)	(a) Type of grant or assistance	ROTHMAN GRANT	SHELLEY PINZ AWARD	NYSCA SLP	NYSCA CHAIRMAN	MARK PROGRAM			

RECOMMENDATIONS FOR POTENTIAL PANELISTS COME FROM MANY SOURCES INCLUDING:
THE ARTISTS' ADVISORY COMMITTEE, ARTS AND CULTURAL ORGANIZATIONS AROUND NEW
YORK STATE AND INDIAN NATIONS LOCATED IN NEW YORK STATE, AND SUGGESTIONS
FROM PRACTICING ARTISTS. ALL POTENTIAL PANELISTS MUST BE PRACTICING ARTISTS
IN THE DISCIPLINE THEY REVIEW AND MUST RECEIVE THREE RECOMMENDATIONS FROM
THEIR FIELD. THE ARTISTS' ADVISORY COMMITTEE THEN APPROVES FINAL CHOICES OF
THE PANELIST THAT REFLECT CONSIDERATIONS OF GENRE, AGE, ETHNICITY, AND
GEOGRAPHY WITHIN NEW YORK STATE AND INDIAN NATIONS LOCATED HEREIN.
APPLICANTS MAY PARTICIPATE IN THIS PROCESS BY SUGGESTING THEMSELVES OR
OTHERS AS PANEL CANDIDATES ON THE APPLICATION. PANELISTS CHANGE EACH YEAR.
THOUGH FELLOWSHIPS ARE UNRESTRICTED CASH GRANTS WE DO REQUIRE THAT THEY
REPORT ON HOW THE FUNDS WERE USED AND TO DESCRIBE THE CREATIVE WORK
ACCOMPLISHED.

THEATER GRANTS, A DIVERSE NATIONAL PANEL OF THEATER LEADERS IS CONVENED TO
REVIEW ALL APPLICATIONS FOR CONSIDERATION AND DELIBERATE ON THE SUBMITTED
REQUESTS. THE AMOUNT FOR EACH GRANTEE IS DECIDED BY THE MELLON FOUNDATION
BASED ON THE PANEL'S RANKINGS. THE MELLON FOUNDATION SENDS A LIST OF
GRANTEES WITH THE AMOUNT OF THE GRANT TO THE NFYA PROJECT MANAGER. THE
PROJECT MANAGER DRAFTS AWARD LETTERS TO THE THEATERS WHICH ARE REVIEWED BY
NYFA'S EXECUTIVE DIRECTOR AND BY MELLON. THE PROJECT MANAGER SENDS THESE
LETTERS, AND THE THEATERS THEN SUBMIT BUDGETS FOR THEIR PLANNED
EXPENDITURES. THE BUDGETS ARE REVIEWED BY THE PROJECT MANAGER AND THE
FINANCE DIRECTOR AND THEN SUBMITTED TO MELLON FOR FINAL APPROVAL. AFTER THE
REVIEW, THE PROJECT MANAGER REQUESTS THE INITIAL AWARD CHECKS FROM THE
FINANCE DEPARTMENT AND THE CHECKS ARE THEN SENT TO THE THEATERS ALONG WITH
THEIR REPORTING GUIDELINES. EACH RECIPIENT IS REQUIRED TO SEND TO NYFA AN
Schedule (Form 990) 2010

Schedule (Form 990) 2010 NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 Page 2 Part IV Supplemental Information
INTERIM REPORT ON HOW THE DOLLARS WERE USED. IN THE CASE OF THE GRANTEES
WHOSE ACTIVITIES ARE COMPLETE, THEY SUBMIT A FINAL REPORT AT THAT TIME. THE
PROGRAM OFFICER VERIFIES THAT THE DOLLARS WERE ALLOCATED APPROPRIATELY
ACCORDING TO THE APPROVED BUDGETS. IF THERE ARE ANY QUESTIONS, THE PROJECT
MANAGER DISCUSSES THE MATTER WITH THE RECIPIENT FOR CLARIFICATION AND
REQUESTS A CHANGE OF SCOPE LETTER AND A CORRESPONDING NEW BUDGET FOR
REVIEW, AS NEEDED. CHANGES OF SCOPE MUST BE APPROVED BY THE EXECUTIVE
DIRECTOR WHO RUNS MAJOR CHANGES BY MELLON FOR APPROVAL. ONCE THE PROJECT
MANAGER, IN CONSULTATION WITH THE DIRECTOR OF DEVELOPMENT, REVIEWS THE
INTERIM/FINAL REPORTS, RECIPIENTS CAN RECEIVE ANY SECOND DISBURSEMENTS. THE
PROJECT MANAGER CREATES A SUMMARY REPORT OF ALL THE GRANTEES' MID-TERM
REPORTING AND SUBMITS THIS TO MELLON. AT THE END OF THE GRANT TERM, ANY
GRANTEES WHO FILED AN INTERIM REPORT WILL THEN FILE A FINAL REPORT TO
CONCLUDE THEIR AWARD CYCLE, WHEREIN THE PROCESS STATED FOR THE INTERIM
REPORT IS REPEATED.

SCHEDULE J (Form 990)

Compensation Information

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

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

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

► Attach to Form 990. ► See separate instructions.

NEW YORK FOUNDATION FOR THE ARTS, INC.

Employer identification number 23-7129564

LES	art 1 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			1	ı
	First-class or charter travel	ł		ŀ	
	Travel for companions Payments for business use of personal residence			İ	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			- 1	ı
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)				ı
				- 1	i
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,				
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	.	2		
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				
	X Compensation committee Written employment contract	l	.	ļ	
	Independent compensation consultant X Compensation survey or study	,			
	X Form 990 of other organizations X Approval by the board or compensation committee	,		ĺ	Į
	<u> </u>				1
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing				l
	organization or a related organization	,			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?		4a	1	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?		4c	_	X
-	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III	-	-		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			ļ	l
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				l
Ť	contingent on the revenues of	ľ			
а		ĺ	5a	ì	X
	Any related organization?	•	5b		X
_	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	İ			
·	contingent on the net earnings of		.		
а	The organization?		6a		Х
	Any related organization?	• •	6b		X
	If "Yes" to line 6a or 6b, describe in Part III	-			
7	·				ĺ
•	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		х
Q		•	' 		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				y
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		_8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			i	l
	Regulations section 53 4958-6(c)?		9		0046
LHA	A For Paperwork Reduction Act Notice, see the Instructions for Form 990.	edule J	(Form	99O)	2010

032111 12-21-10 NEW YORK FOUNDATION FOR THE ARTS, INC.

Schedule J (Form 990) 2010

Page 2

23-7129564

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E) Total of columns	(F)
(А) Nате		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported in prior Form 990 or Form 990-EZ
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							Schedu	Schedule J (Form 990) 2010

SCHEDULE M (Form 990)

Noncash Contributions

2010

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Open to Public Inspection

Name of the organization

Employer identification number

	NEW YORK FOU	NDATIC	N FOR THE	ARTS	_INC		23-7	129	<u> 564</u>	
Pai	t I Types of Property									
		(a) Check if applicable	(b) Number of contributions or items contributed	amount	(c) h contribution s reported on Part VIII, line	ne	(d) Method of de oncash contribu	etermir		s
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	4		357,816	FAI.	R MARKET	' VA	LUE	
10	Securities - Closely held stock	<u></u>				_				
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -					1				
	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			L						
21	Taxidermy								-	
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts _									
25	Other ()	ļ								
26	Other ()		ļ							
27	Other ()		 							
<u>28</u> _	Other ()	1	<u> </u>							
29	Number of Forms 8283 received by the organ		- ,		1 1					
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement	. 29					
									Yes	No_
30a	During the year, did the organization receive b	-								}
	at least three years from the date of the initial	contribution	, and which is not	required to	be used for ex	xempt pur	poses for			
	the entire holding period?	•				-		30a	<u> </u>	X
	If "Yes," describe the arrangement in Part II.									
31	Does the organization have a gift acceptance	-	•	•			?	31	X	
32a	Does the organization hire or use third parties contributions?	or related o	rganizations to soli	cit, proces	s, or sell nonca	ash 		32a		<u>x</u>
b	If "Yes," describe in Part II									
33	If the organization did not report an amount in	column (c)	for a type of prope	rty for whic	h column (a) is	checked	,			1
	describe in Part II							<u> </u>		<u> </u>
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.			Schedule M	(Form	990) ((2010)

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

NEW YORK FOUNDATION FOR THE ARTS, INC.

Employer identification number 23-7129564

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
NYFA ACCOMPLISHES THIS BY OFFERING FINANCIAL ASSISTANCE AND INFORMATION
TO ARTISTS AND ORGANIZATIONS THAT DIRECTLY SERVE ARTISTS, BY SUPPORTING
ARTS PROGRAMMING IN THE COMMUNITY, AND BY BUILDING COLLABORATIVE
RELATIONSHIPS WITH OTHERS WHO ADVOCATE FOR THE ARTS IN NEW YORK STATE
AND THROUGHOUT THE COUNTRY. EACH YEAR NYFA AWARDS CLOSE TO \$1 MILLION
TO INDIVIDUAL ARTISTS AND SMALL AND EMERGING ORGANIZATIONS THOUGH ITS
FELLOWSHIP AND OTHER GRANT PROGRAMS. NYFA'S LEARNING PROGRAMS SERVE
THOUSANDS OF ARTISTS THROUGH WORKSHOPS, PANEL DISCUSSIONS, AND
INDIVIDUAL MENTORING ON TOPICS RANGING FROM GRANT WRITING AND BUDGETING
TO CREATING AN ARTIST PORTFOLIO AND AUDIENCE DEVELOPMENT. THE FISCAL
SPONSORSHIP PROGRAM IS ONE OF THE LARGEST AND MOST ESTABLISHED IN THE
COUNTRY AND HELPS ARTISTS AND ORGANIZATIONS RAISE AND MANAGE OVER \$5
MILLION ANNUALLY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROGRAMMING IN THE COMMUNITY, AND BY BUILDING COLLABORATIVE
RELATIONSHIPS WITH OTHERS WHO ADVOCATE FOR THE ARTS IN NEW YORK STATE
AND THROUGHOUT THE COUNTRY. EACH YEAR NYFA AWARDS CLOSE TO \$1 MILLION
TO INDIVIDUAL ARTISTS AND SMALL AND EMERGING ORGANIZATIONS THOUGH ITS
FELLOWSHIP AND OTHER GRANT PROGRAMS. NYFA'S LEARNING PROGRAMS SERVE
THOUSANDS OF ARTISTS THROUGH WORKSHOPS, PANEL DISCUSSIONS, AND
INDIVIDUAL MENTORING ON TOPICS RANGING FROM GRANT WRITING AND BUDGETING
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SPONSORSHIP PROGRAM IS ONE OF THE LARGEST AND MOST ESTABLISHED IN THE
COUNTRY AND HELPS ARTISTS AND ORGANIZATIONS RAISE AND MANAGE OVER \$5
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010) 032211 01:24-11

Name of the organization Employer identification number NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 MILLION ANNUALLY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: IMMIGRANT OUTREACH PROGRAM, NYFA SOURCE, MARK PROGRAM, NYFA LEARNING, CLASSIFIED, AND BOOT CAMP. EXPENSES \$ 713,015. INCLUDING GRANTS OF \$ 0. REVENUE \$ 466,424. FORM 990, PART VI, SECTION A, LINE 1: THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY WHENEVER NECESSARY. FORM 990, PART VI, SECTION B, LINE 11: AFTER IT IS PREPARED BY THE ORGANIZATION'S INDEPENDENT ACCOUNTANTS, THE EXECUTIVE DIRECTOR, THE <u>DIRECTOR OF FINANCE AND ADMINISTRATION</u>, AS WELL AS THE AUDIT COMMITTEE, REVIEW A DRAFT OF THE FORM 990. THE BOARD OF TRUSTEES ARE PROVIDED A DRAFT OF THE 990 FOR REVIEW. ONCE REVIEWED, THE BOARD IS ASKED TO APPROVE THE 990 FOR FILING. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY FOR THE TRUSTEES: ANY DIRECTOR OF OFFICER WHO HAS ANY PERSONAL INTEREST IN ANY DECISION REGARDING A CONTRACT, SALE, PURCHASE, LEASE, EXCHANGE OR SERVICE RELATED IN ANY WAY TO NYFA MUST DECLARE THAT INTEREST TO THE BOARD AND REFRAIN FROM VOTING UPON SUCH DECISION OR, DEPENDING UPON THE DEGREE OF PERSONAL INTEREST, PARTICIPATING IN ANY WAY IN THE DECISION-MAKING PROCESS. DIRECTORS WILL ADDITIONALLY DISCLOSE THEIR DIRECT OR INDIRECT FINANCIAL INTEREST IN ANY PROSPECTIVE TRANSACTIONS INVOLVING THEMSELVES, THEIR IMMEDIATE FAMILIES, THEIR BUSINESSES, AND NYFA. DIRECTORS WILL ABSTAIN FROM VOTING ON ANY BOARD MATTER IN WHICH THEY HOLD A FINANCIAL INTEREST AND MAY NOT SEEK TO BEAR INFLUENCE ON ANY OTHER DIRECTOR OR STAFF MEMBER ON ANY Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010) Page 2 Name of the organization Employer identification number NEW YORK FOUNDATION FOR THE ARTS, INC. 23-7129564 NYFA ACTION IN WHICH THEIR FINANCIAL INTEREST IS INVOLVED. IN THE EVENT THAT ANY DIRECTOR HAS A CONFLICT OF INTEREST, SUCH DIRECTOR SHALL INFORM THE BOARD. IF THOSE CIRCUMSTANCES REQUIRE THE NONPARTICIPATION OF THE AFFECTED DIRECTOR, THE BOARD MAY NONETHELESS REQUEST FROM THE DIRECTOR ANY APPROPRIATE NON CONFIDENTIAL INFORMATION WHICH MIGHT INFORM ITS DECISION. NO DIRECTOR SHALL CAST A VOTE, NOR TAKE PART IN THE FINAL DELIBERATION IN ANY MATTER IN WHICH HE OR SHE, MEMBERS OF HIS OR HER IMMEDIATE FAMILY, OR ANY ORGANIZATION TO WHICH SUCH DIRECTOR HAS ALLEGIANCE, HAS A PERSONAL INTEREST THAT MAY BE SEEN AS COMPETING WITH THE INTEREST OF NYFA. ANY DIRECTOR WHO BELIEVES HE OR SHE MAY HAVE SUCH A CONFLICT OF INTEREST SHALL SO NOTIFY THE BOARD PRIOR TO DELIBERATION ON THE MATTER IN QUESTION, AND THE BOARD SHALL MAKE THE FINAL DETERMINATION AS TO WHETHER ANY DIRECTOR HAS A CONFLICT OF INTEREST IN ANY MATTER. THE MINUTES OF THE BOARD MEETING SHALL REFLECT DISCLOSURE OF ANY CONFLICT OF INTEREST AND THE RECUSAL OF THE INTERESTED DIRECTOR. FORM 990, PART VI, SECTION B, LINE 15: EACH YEAR THE BOARD, LEAD BY THE CHAIRPERSON, PUTS TOGETHER AN ANNUAL REVIEW COMMITTEE, COMPRISED OF THE CHAIR, TREASURER AND A BOARD REPRESENTATIVE FROM THE FOUNDATION WORLD. THIS GROUP RESEARCHES REPORTS AND SURVEYS ON SALARIES FOR CEO OF NOT FOR PROFITS WITH SIMILAR MISSIONS, BUDGET SIZES AND GEOGRAPHY, AND CONTRAST THESE SALARIES AGAINST THOSE LISTED ON WEBSITES SUCH AS GUIDESTAR TO DETERMINE AN APPROPRIATE COMPENSATION FOR THE EXECUTIVE DIRECTOR.

IN FY '11, THE BOARD OF TRUSTEES APPROVED SALARY INCREASES RANGING FROM 3% TO _5%. THE PERCENTAGE INCREASE WAS BASED ON THE AMOUNT OF YEARS THE Schedule O (Form 990 or 990-EZ) (2010)

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

internal nevi	File a sepa	trate appli	ication for each return.							
• If you a	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			X				
	are filing for an Additional (Not Automatic) 3-Month Ext			form).						
	omplete Part II unless you have already been granted a				m 8868					
	ic filing (e-file). You can electronically file Form 8868 if y					ration				
	to file Form 990-T), or an additional (not automatic) 3-mor									
	file any of the forms listed in Part I or Part II with the exc									
	Benefit Contracts, which must be sent to the IRS in pap-									
	urs gov/efile and click on e-file for Chanties & Nonprofits.		•							
Part I	Automatic 3-Month Extension of Time	Only sul	bmit original (no copies needed)							
A corpora	ation required to file Form 990-T and requesting an auton			plete						
Part I onl	у				•					
All other	corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to request an	exten	sion of time					
to file inc	ome tax returns									
Type or	Name of exempt organization		•	Empl	oyer identification	number				
print					•					
	NEW YORK FOUNDATION FOR THE	E ARTS	S, INC.	2	3-7129564					
File by the due date for Number, street, and room or suite no. If a P O. box, see instructions										
iling your eturn See 20 JAY STREET, NO. 740										
City, town or post office, state, and ZIP code For a foreign address, see instructions										
BROOKLYN, NY 11201										
Enter the Return code for the return that this application is for (file a separate application for each return)										
Application Return Application Return										
Is For Code Is For Co										
Form 990	Form 990 01 Form 990-T (corporation) 07									
Form 990-BL 02 Form 1041-A 08										
Form 990-EZ 03 Form 4720 09										
Form 990)-PF	04	Form 5227			10				
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11				
	0-T (trust other than above)	06	Form 8870		- '-	12				
	FELIX ROSENWASS									
• The b	ooks are in the care of > 20 JAY STREET,		E 740 - BROOKLYN, NY	11	201					
	none No. ► 212-366-6900		FAX No 🕨	<u>-</u>						
	organization does not have an office or place of business	s in the Un	inted States, check this box							
	is for a Group Return, enter the organization's four digit (s is foi	the whole group, c	heck this				
	. If it is for part of the group, check this box									
	quest an automatic 3-month (6 months for a corporation									
	FEBRUARY 15, 2012 , to file the exemp	-	•		The extension					
is f	or the organization's return for	J	3							
>	calendar year or									
>	X tax year beginning JUL 1, 2010	, an	d ending JUN 30, 2011							
		· · ·								
2 ft	he tax year entered in line 1 is for less than 12 months, c	heck reas	on. Initial return Fina	l retur	n					
	Change in accounting period									
	_									
3a If ti	his application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069. e	nter the tentative tax. less any		·					
	nrefundable credits. See instructions.			3a	\$	0.				
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and							
	imated tax payments made. Include any prior year overp	-		3b	\$	0.				
	lance due. Subtract line 3b from line 3a. Include your pa			UU	¥					
	using EFTPS (Electronic Federal Tax Payment System)	-	•	3c	•	0.				
	If you are going to make an electronic fund withdrawal v		. = . =		EO for payment that					
			Jim 6006, See Form 6455-EO and Form	00/9-						
/ · ·	or Paperwork Reduction Act Notice, see Instructions	••			Form 8868 (Re	v. 1-2011)				