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Form 990  Department of the Treasury Internal Revenue Service	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) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047 2011 Open to Public Inspection
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A For the 2011 calendar year, or tax year beginning 06-01-2011 and ending 05-31-2012		
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 145 TREMONT STREET NO 7TH FL City or town, state or country, and ZIP + 4 BOSTON, MA 021110010	D Employer identification number 04-2593591
		E Telephone number (617) 951-0010
		G Gross receipts \$ 9,414,971
	F Name and address of principal officer LAURA PAUL 145 TREMONT STREET NO 7TH FL BOSTON,MA 021110010	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀(insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.NEFA.ORG		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1976
M State of legal domicile MA		

Part I	Summary
Activities & Governance	1 Briefly describe the organization's mission or most significant activities NEFA'S MISSION IS TO CREATIVELY SUPPORT THE MOVEMENT OF PEOPLE, IDEAS, AND RESOURCES IN THE ARTS WITHIN NEW ENGLAND AND BEYOND, MAKE VITAL CONNECTIONS BETWEEN ARTISTS AND COMMUNITIES, AND BUILD THE STRENGTH, KNOWLEDGE, AND LEADERSHIP OF THE REGION'S CREATIVE SECTOR. EACH PROGRAM AND PROJECT THAT IS BROUGHT TO LIFE AT NEFA IS CREATED WITH THE UNDERLYING GOAL OF BUILDING A STRONGER AND MORE DYNAMIC INFRASTRUCTURE FOR THE ARTS. THROUGH RESEARCH, DOCUMENTATION, AND EVALUATION, NEFA WORKS TO DEMONSTRATE THE ECONOMIC IMPACT OF THE ARTS, AND TO ENHANCE PUBLIC UNDERSTANDING OF HOW THE ARTS CONTRIBUTE TO THE VITALITY OF COMMUNITIES
	2 Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets
	3 Number of voting members of the governing body (Part VI, line 1a)
	4 Number of independent voting members of the governing body (Part VI, line 1b)
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)
	6 Total number of volunteers (estimate if necessary)
Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12
	b Net unrelated business taxable income from Form 990-T, line 34
Expenses	8 Contributions and grants (Part VIII, line 1h)
	9 Program service revenue (Part VIII, line 2g)
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)
	14 Benefits paid to or for members (Part IX, column (A), line 4)
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)
	16a Professional fundraising fees (Part IX, column (A), line 11e)
	b Total fundraising expenses (Part IX, column (D), line 25) ▶275,461
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)
	19 Revenue less expenses. Subtract line 18 from line 12

Part II Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here		*****	2012-10-11	
		Signature of officer	Date	
Paid Preparer's Use Only		LAURA PAUL COO		
		Type or print name and title		
Paid Preparer's Use Only	Preparer's signature 	CARLA M MCCALL CPA	Date 2012-10-11	Check if self-employed <input checked="" type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 	ALEXANDER ARONSON FINNING & CO PC 21 EAST MAIN STREET WESTBORO, MA 01581		Preparer's taxpayer identification number (see instructions) P00535908
				EIN ▶ 04-2571780 Phone no ▶ (508) 366-9100
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

SEE FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION

2

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

Yes

No

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

3

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

Yes

No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 2,957,457 including grants of \$ 2,457,044) (Revenue \$ 535)

DANCE - PROVIDES SUPPORT FOR THE CREATION AND TOURING OF DANCE WORK THROUGH GRANTS TO DANCE ARTISTS AND PRESENTERS, FOSTERS COMMUNITY ENGAGEMENT AND INTERNATIONAL EXCHANGE, AND THROUGH SPECIAL INITIATIVES, CREATES OPPORTUNITIES FOR DANCE ARTISTS AT VARIOUS STAGES IN THEIR CAREERS

4b

(Code) (Expenses \$ 653,563 including grants of \$ 428,641) (Revenue \$ 0)

NATIONAL THEATER PROJECT (FORMERLY KNOWN AS NATIONAL THEATER PILOT) - EXPLORES CREATING A SYSTEM OF SUPPORT FOR PROFESSIONAL ARTIST-LED COLLABORATIVE, DEVISED THEATER MODELED AFTER NEFA'S NATIONAL DANCE PROJECT, THE PROJECT SELECTED TWO ROUNDS OF SIX PROJECTS EACH TO TEST ASSUMPTIONS ABOUT SUPPORTING ENSEMBLE THEATER DEVELOPMENT AND TOURING IN THE UNITED STATES (U S)

4c

(Code) (Expenses \$ 572,237 including grants of \$ 386,628) (Revenue \$ 12,734)

NEW ENGLAND PRESENTING AND TOURING - CONNECTS NEW ENGLAND ARTISTS AND COMMUNITIES THROUGH GRANTS FOR PERFORMING ARTS TOURING AND PROGRAM SERVICES, INCLUDING MATCHBOOK ORG, A FREE ONLINE CULTURAL MARKETPLACE AND DIRECTORY FOR PERFORMING ARTISTS, PRESENTERS, AND VENUES

(Code) (Expenses \$ 931,459 including grants of \$ 229,423) (Revenue \$ 59,166)

OTHER PROGRAM SERVICES INCLUDE CENTER STATE, PUBLIC ART, NATIVE ARTS, SPONSORED PROJECTS, GENERAL PROGRAM SERVICES, AND RESEARCH, DOCUMENTATIONS & EVALUATION

4d

Other program services (Describe in Schedule O)

(Expenses \$ 931,459 including grants of \$ 229,423) (Revenue \$ 59,166)

4e

Total program service expenses

\$ 5,114,716

Form 990 (2011)

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
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.		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
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.	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		No
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.		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
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.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV.		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.		No
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.		No
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.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	54			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c				No
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a				No
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.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				No
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				No
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	23		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	23
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	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed MA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. LAURA PAUL CHIEF OPERATING OFFICER 145 TREMONT STREET BOSTON, MA 02111 (617) 951-0010

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, and **current** key employees. 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALEXANDER ALDRICH DIRECTOR	1.00	X						0	0	0
(2) MARY KELLEY CHAIR	1.00	X		X				0	0	0
(3) JOHN PLUKAS TREASURER	1.00	X		X				0	0	0
(4) JENNIFER LIN DIRECTOR	1.00	X						0	0	0
(5) PETER NESSEN DIRECTOR	1.00	X						0	0	0
(6) GEETA AIYER DIRECTOR	1.00	X						0	0	0
(7) ANITA WALKER DIRECTOR	1.00	X						0	0	0
(8) BYRON CHAMPLIN BOARD SECRETARY	1.00	X		X				0	0	0
(9) SANDRA BURTON DIRECTOR	1.00	X						0	0	0
(10) THEODORE LANDSMARK DIRECTOR	1.00	X						0	0	0
(11) JEREMY LIU DIRECTOR	1.00	X						0	0	0
(12) JANE JAMES DIRECTOR	1.00	X						0	0	0
(13) RANDALL ROSENBAUM DIRECTOR	1.00	X						0	0	0
(14) LAWRENCE SIMPSON VICE CHAIR	1.00	X		X				0	0	0
(15) CHRISTOPHER MCMAHAN DIRECTOR	1.00	X						0	0	0
(16) RAUL MEDINA DIRECTOR	1.00	X						0	0	0
(17) ANDREW CORNELL DIRECTOR	1.00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DAVID MCWILLIAMS DIRECTOR	1 00	X						0	0	0
(19) LYNN MARTIN GRATON DIRECTOR	1 00	X						0	0	0
(20) TRUDIE LAMB RICHMOND DIRECTOR	1 00	X						0	0	0
(21) DAVID BAHLMAN DIRECTOR	1 00	X						0	0	0
(22) DARRELL BULMER DIRECTOR	1 00	X						0	0	0
(23) ANDREA ROGERS DIRECTOR	1 00	X						0	0	0
(24) REBECCA BLUNK EXECUTIVE DIRECTOR	40 00			X				139,691	0	10,213
(25) LAURA PAUL CHIEF OPERATING OFFICER	32 00			X				72,104	0	9,986
(26) JANE PRESTON DIRECTOR OF PROGRAMS	40 00			X				94,182	0	9,072
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								305,977	0	29,271

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year		
(A) Name and business address		(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶0		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	1,554,882			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	6,253,640			
	g	Noncash contributions included in lines 1a-1f \$ 17,765					
	h	Total. Add lines 1a-1f		7,808,522			
Program Service Revenue	2a	SERVICE FEES	Business Code 900099	67,748	67,748		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		67,748			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		182,242		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross rents	(i) Real 4,687	(ii) Personal			
b		Less rental expenses	0				
c		Rental income or (loss)	4,687				
d		Net rental income or (loss)		4,687	4,687		
7a		Gross amount from sales of assets other than inventory	(i) Securities 1,351,772	(ii) Other			
b		Less cost or other basis and sales expenses	1,332,121				
c		Gain or (loss)	19,651				
d		Net gain or (loss)		19,651			19,651
8a		Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less direct expenses	b				
c		Net income or (loss) from fundraising events . .					
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . .					
10a		Gross sales of inventory, less returns and allowances	a				
b		Less cost of goods sold . . .	b				
c		Net income or (loss) from sales of inventory . .					
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions		8,082,850	72,435	0	201,893	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	3,359,163	3,359,163		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	142,573	142,573		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	350,132	123,712	120,439	105,981
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	777,422	526,932	131,453	119,037
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	32,936	19,217	7,209	6,510
9	Other employee benefits	76,574	51,911	11,674	12,989
10	Payroll taxes	92,861	54,180	20,326	18,355
11	Fees for services (non-employees)				
a	Management				
b	Legal	6,110	2,312	3,798	
c	Accounting	19,090	7,224	11,866	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	47,608	20,443	27,165	
g	Other	294,126	287,264	6,417	445
12	Advertising and promotion	19,798	18,331	1,467	
13	Office expenses	103,567	71,065	31,557	945
14	Information technology	57,762	30,593	27,169	
15	Royalties				
16	Occupancy	177,431	58,984	118,447	
17	Travel	111,762	108,895	834	2,033
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	66,660	55,958	2,494	8,208
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	59,645	19,828	39,817	
23	Insurance	7,379	2,453	4,926	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	HONORARIA	115,600	115,600		
b	MISCELLANEOUS	51,647	36,888	13,801	958
c	EQUIPMENT	3,579	1,190	2,389	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	5,973,425	5,114,716	583,248	275,461
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			713,917	1	884,344
	2	Savings and temporary cash investments			3,398,278	2	1,900,987
	3	Pledges and grants receivable, net			7,443,875	3	4,988,007
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			20,677	9	268,307
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	552,978			
	b	Less: accumulated depreciation	10b	448,015	102,509	10c	104,963
	11	Investments—publicly traded securities			4,991,237	11	5,352,114
	12	Investments—other securities. See Part IV, line 11			1,227,404	12	6,156,676
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			12,727	15	12,727
16	Total assets. Add lines 1 through 15 (must equal line 34)			17,910,624	16	19,668,125	
Liabilities	17	Accounts payable and accrued expenses			203,483	17	214,138
	18	Grants payable			2,705,397	18	2,610,688
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			121,711	21	120,111
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			3,030,591	26	2,944,937
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets			3,074,978	27	3,059,264
28		Temporarily restricted net assets			11,805,055	28	13,663,924
29		Permanently restricted net assets				29	
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
30		Capital stock or trust principal, or current funds				30	
31		Paid-in or capital surplus, or land, building or equipment fund				31	
32		Retained earnings, endowment, accumulated income, or other funds				32	
33		Total net assets or fund balances			14,880,033	33	16,723,188
34		Total liabilities and net assets/fund balances			17,910,624	34	19,668,125

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,082,850
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,973,425
3	Revenue less expenses Subtract line 2 from line 1	3	2,109,425
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,880,033
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-266,270
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	16,723,188

Part XII Financial Statements and Reporting

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

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED	Employer identification number 04-2593591
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Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1	<input type="checkbox"/>	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).
2	<input type="checkbox"/>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	<input checked="" type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)
8	<input type="checkbox"/>	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety Se section 509(a)(4).
11	<input type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a <input type="checkbox"/> Type I b <input type="checkbox"/> Type II c <input type="checkbox"/> Type III - Functionally integrated d <input type="checkbox"/> Type III - Other
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	<input type="checkbox"/>	Provide the following information about the supported organization(s)

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,620,187	4,630,289	7,805,016	5,483,661	7,790,759	29,329,912
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,620,187	4,630,289	7,805,016	5,483,661	7,790,759	29,329,912
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						14,165,694
6 Public Support. Subtract line 5 from line 4						15,164,218

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	3,620,187	4,630,289	7,805,016	5,483,661	7,790,759	29,329,912
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	246,334	198,626	151,519	142,535	182,242	921,256
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						30,251,168

12 Gross receipts from related activities, etc (See instructions)

12483,519

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	50 130 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	77 620 %

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIIPart III

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

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

Facts And Circumstances Test

Explanation

Additional Data

Software ID:
Software Version:
EIN: 04-2593591
Name: NEW ENGLAND FOUNDATION FOR THE ARTS
INCORPORATED

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services
(Code) (Expenses \$ 931,459 including grants of \$ 229,423) (Revenue \$ 59,166) OTHER PROGRAM SERVICES INCLUDE CENTER STATE, PUBLIC ART, NATIVE ARTS, SPONSORED PROJECTS, GENERAL PROGRAM SERVICES, AND RESEARCH, DOCUMENTATIONS & EVALUATION

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED	Employer identification number 04-2593591
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

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

1

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

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

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2011

Part III

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

3

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

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☒ No

b

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

	Amount
1c	
1d	
1e	
1f	

2a

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

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		208,431	201,233	7,198
d Equipment		112,870	88,932	23,938
e Other		231,677	157,850	73,827
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				104,963

Schedule D (Form 990) 2011

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,082,850
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,973,425
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,109,425
4	Net unrealized gains (losses) on investments	4	-266,270
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-266,270
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,843,155

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,768,972
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-266,270
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-266,270
3	Subtract line 2e from line 1	3	8,035,242
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	47,608
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	47,608
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	8,082,850

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	5,925,817
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,925,817
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	47,608
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	47,608
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	5,973,425

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	NEFA WAS A FISCAL AGENT FOR THE FOLLOWING STATE ARTS AGENCIES MASSACHUSETTS AND NEW HAMPSHIRE NEFA RECEIVES AND DISBURSES FUNDS ON BEHALF OF THESE ORGANIZATIONS EACH OF THESE AGENCIES ALSO FUNDS NEFA IN ACCORDANCE WITH NEFA'S BY-LAWS, THE EXECUTIVE DIRECTORS OF THE ABOVE-MENTIONED AGENCIES, AS WELL AS THE CONNECTICUT, MAINE, RHODE ISLAND, AND VERMONT STATE ARTS AGENCIES, ARE ALSO BOARD MEMBERS OF NEFA

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
04-2593591

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

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

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

150

3

Enter total number of other organizations listed in the line 1 table

150

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SUPPORT FOR THE CREATION OF A MULTIMEDIA PROJECT ABOUT WOMEN IN PAKISTAN	1	104,600			
(2) PROMOTE THE EXCHANGE OF NATIVE ARTS ARTMAKING SKILLS AND KNOWLEDGE	16	36,823			
(3) SUPPORT THE EXCHANGE AND OUTREACH OF NEW THEATER PRODUCTIONS	2	1,150			

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

Identifier	Return Reference	Explanation
		IN MANY CASES, FUNDING IS AWARDED BUT NOT PAID UNTIL THE ACTIVITY TAKES PLACE FOR ALL BUT SMALL TRAVEL ASSISTANCE AWARDS, A FINAL REPORT IS REQUIRED AND AN INTERIM REPORT MAY ALSO BE REQUIRED

Software ID:

Software Version:

EIN: 04-2593591

Name: NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
651 ARTS651 FULTON STREET BROOKLYN,NY 11217	11-2956108		8,000				PRESENTATION SUPPORT
ACTORS THEATRE OF LOUISVILLE316 W MAIN STREET LOUISVILLE,KY 402024218	61-0645030		13,000				PRESENTATION SUPPORT
ALABAMA DANCE COUNCILPO BOX 2126 BIRMINGHAM,AL 352012126	63-0815232		7,500				PRESENTATION SUPPORT
ALVERNO COLLEGE - ALVERNO PRESENTS3400 SOUTH 43RD STREET PO BOX 343922 MILWAUKEE,WI 532343922	39-0806263		5,000				PRESENTATION SUPPORT
AMERICAN DANCE FESTIVAL INCORPORATED715 BROAD STREET DURHAM,NC 27705	06-0932294		35,500				PRESENTATION SUPPORT
AMERICAN DANCE INSTITUTE1570 EAST JEFFERSON STREET ROCKVILLE,MD 20852	52-2158599		5,000				PRESENTATION SUPPORT
AMERICAN RECORDS6120 FILLMORE PLACE UNIT 7 WEST NEW YORK,NJ 07092	27-2303050		5,000				PRESENTATION SUPPORT
AMHERST COLLEGE DEPARTMENT OF MUSICPO BOX 2258 AMHERST,MA 01002	04-2103542		7,150				PRESENTATION SUPPORT
ARIZONA STATE UNIVERSITYPO BOX 870205 TEMPE,AZ 852870205	86-6051042		7,700				PRESENTATION SUPPORT
ARTS ALLIANCE OF NORTHERN NEW HAMPSHIREPO BOX 892 LITTLETON,NH 03561	02-0407490		11,425				DEVELOPMENT & PRESENTATION SUPPORT
ARTS AT SAINT ANN'S55 WASHINGTON STREET SUITE 458 BROOKLYN,NY 11201	11-2665242		20,000				PRESENTATION SUPPORT
ARTSWEGO OSWEGO STATE UNIVERSITY105 MAHAR HALL OSWEGO,NY 13126	15-0543477		5,000				PRESENTATION SUPPORT
BATES DANCE FESTIVAL PETTIGREW HALL 305 COLLEGE STREET LEWISTON,ME 042406016	01-0211781		22,000				PRESENTATION SUPPORT
BETH MORRISON PROJECTS305 EAST 93RD STREET 4B NEW YORK,NY 10128	20-8422447		7,500				PRODUCTION SUPPORT
BROWN UNIVERSITY CREATIVE ARTS COUNCILBOX 1987 PROVIDENCE,RI 02912	05-0258809		17,000				PRESENTATION SUPPORT
BUNNELL STREET ARTS CENTER106 WEST BUNNELL SUITE A HOMER,AK 99603	94-3220880		5,200				PRESENTATION SUPPORT
CAL PERFORMANCES101 ZELLERBACH HALL 4800 UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY,CA 94720	94-6002123		17,000				PRESENTATION SUPPORT
CELEBRITY SERIES OF BOSTON20 PARK PLAZA SUITE 1032 BOSTON,MA 021164303	22-2958508		14,000				PRESENTATION SUPPORT
CHEZ BUSHWICK INCORPORATED304 BOERUM STREET 23 BROOKLYN,NY 112063590	56-2630951		15,000				PRESENTATION SUPPORT
CHHANDIKA131 WOERD AVENUE WALTHAM,MA 02453	22-3895077		9,000				PRESENTATION SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHOREGUS PRODUCTIONS INC 3719 SOUTH WHEELING TULSA,OK 74105	26-4178606		6,000				PRESENTATION SUPPORT
CLEVELAND MODERN DANCE ASSOCIATION13110 SHAKER SQUARE SUITE 106 CLEVELAND,OH 44120	34-6561006		15,000				PRESENTATION SUPPORT
COLLEGE OF SAINT BENEDICT - BENEDICTA ARTS CENTER37 S COLLEGE AVENUE ST JOSEPH,MN 56374	41-0969244		6,000				PRESENTATION SUPPORT
COLLEGES OF THE SENECA HOBART & WILLIAM SMITH DANCE DEPARTMENT WINN SEELEY GYM 300 PULTENEY STREET GENEVA,NY 14456	16-0743040		6,000				PRESENTATION SUPPORT
COLUMBIA COLLEGE CHICAGO - THE DANCE CENTER1306 SOUTH MICHIGAN AVENUE CHICAGO,IL 60605	36-6112087		7,000				PRESENTATION SUPPORT
COMMUNITY THEATER PROJECT CORPORATION5530 PENN AVENUE SUITE A PITTSBURGH,PA 15206	31-1692848		6,000				PRESENTATION SUPPORT
CONTEMPORARY DANCE THEATER INCORPORATED 1805 LARCH AVENUE CINCINNATI,OH 452242928	23-7431573		11,500				PRESENTATION SUPPORT
COUNTERPULSE 1310 MISSION STREET SAN FRANCISCO,CA 94103	94-2986114		79,000				PRODUCTION, PRESENTATION & GENERAL OPERATING SUPPORT
CURRAN EVENTS INC21 FIRST AVENUE 18 NEW YORK,NY 10003	13-4159375		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
CUYAHOGA COMMUNITY COLLEGE FOUNDATION - TRI-C PRESENTS700 CARNEGIE AVENUE CLEVELAND,OH 44115	23-7320719		10,000				PRESENTATION SUPPORT
DANCE AFFILIATES 4701 BATH STREET BUILDING 46B PHILADELPHIA,PA 19137	23-2138376		7,000				PRESENTATION SUPPORT
DANCE THEATER WORKSHOP INCORPORATED219 WEST 19TH STREET NEW YORK,NY 100114079	13-6206608		18,610				PRESENTATION SUPPORT
DANCING IN THE STREETS INCORPORATED928 SIMPSON STREET 6TH FLOOR BRONX,NY 10459	11-2706055		7,000				PRESENTATION SUPPORT
DARTMOUTH COLLEGE HOPKINS CENTER6041 LOWER WILSON HALL HANOVER,NH 037553543	02-0222111		35,800				PRESENTATION SUPPORT
DC WHEEL PRODUCTIONS DANCE PLACE DANCE PLACE 3225 8TH STREET NE WASHINGTON,DC 20017	52-1118504		13,200				PRESENTATION SUPPORT
DIVERSEWORKS ARTSPACE1117 EAST FREEWAY HOUSTON,TX 770021108	76-0035355		50,000				PRODUCTION SUPPORT
DOVA INCORPORATED260 WEST BROADWAY SUITE 4 NEW YORK,NY 10013	13-2678071		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
EAST CAROLINA UNIVERSITY - ALEXANDER PERFORMING ARTS SERIES105 ERWIN BUILDING MS 528 GREENVILLE,NC 27858	56-6000403		10,000				PRESENTATION SUPPORT
EAST TENNESSEE STATE UNIVERSITY 100 CR DRIVE OFFICE OF RESEARCH AND SPONSORED PROGRAM JOHNSON CITY,TN 37614	62-6021046		5,700				PRESENTATION SUPPORT
EMPIRE STATE PLAZA PERFORMING ARTS CENTERPO BOX 2065 ALBANY,NY 12220	14-1614327		8,000				PRESENTATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAIRFIELD UNIVERSITY QUICK CENTER FOR THE ARTS1073 NORTH BENSON ROAD FAIRFIELD, CT 06824	06-0646623		5,700				PRESENTATION SUPPORT
FIST AND HEEL PERFORMANCE GROUP476 DEAN STREET SUITE 2 BROOKLYN, NY 11217	04-3702601		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
FLYNN CENTER FOR THE PERFORMING ARTS LIMITED153 MAIN STREET BURLINGTON, VT 05401	03-0277052		29,300				PRESENTATION SUPPORT
FRESH MEAT PRODUCTIONS375 27TH STREET A SAN FRANCISCO, CA 94131	80-0225836		39,500				PRODUCTION & GENERAL OPERATING SUPPORT
GERMANTOWN PERFORMING ARTS CENTRE1801 EXETER ROAD GERMANTOWN, TN 38138	58-1652763		5,500				PRESENTATION SUPPORT
GOTHAM ARTS EXCHANGE INCORPORATED506 FORT WASHINGTON AVENUE 1H NEW YORK, NY 10033	13-4176262		20,000				PRODUCTION SUPPORT
GOTHAM DANCE INCORPORATED BEBE MILLER COMPANY140 SECOND AVENUE SUITE 404 NEW YORK, NY 10003	13-3618577		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
HALEAKALA INCORPORATED DBA THE KITCHEN512 WEST 19TH STREET NEW YORK, NY 10011	13-2829756		15,000				PRESENTATION SUPPORT
HARRIS THEATER 205 EAST RANDOLPH DRIVE CHICAGO, IL 60601	36-3930153		10,000				PRESENTATION SUPPORT
HENRY STREET SETTLEMENT - ABRONS ART CENTER466 GRAND STREET NEW YORK, NY 10002	13-1562242		5,500				PRESENTATION SUPPORT
ILAND INCORPORATED140 SECOND AVENUE 501 NEW YORK, NY 10003	20-1900264		32,000				PRODUCTION & GENERAL OPERATING SUPPORT
INDIA FINE ARTS INCORPORATED 9917 SPICEWOOD MESA AUSTIN, TX 78759	74-2741191		8,000				PRESENTATION SUPPORT
INTERNATIONAL AFRICAN ARTS FESTIVALPO BOX 47-1730 BROOKLYN, NY 11247	11-2953522		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
IRVINE BARCLAY THEATER4199 CAMPUS DRIVE SUITE 680 IRVINE, CA 92612	33-0157868		5,000				PRESENTATION SUPPORT
JACOB'S PILLOW DANCE FESTIVAL 358 GEORGE CARTER ROAD BECKET, MA 012234001	04-6002993		18,000				PRESENTATION SUPPORT
JAMES MADISON UNIVERSITY SCHOOL OF THEATRE AND DANCE147 WARSAW AVENUE MSC 5601 HARRISONBURG, VA 22807	54-6001756		5,000				PRESENTATION SUPPORT
JAPAN SOCIETY INC 333 EAST 47TH STREET NEW YORK, NY 10017	13-1675082		10,500				GENERAL OPERATING SUPPORT
JAPAN SOCIETY INC 333 EAST 47TH STREET NEW YORK, NY 10017	13-1675082		40,000				PRODUCTION SUPPORT
JOSE LIMON DANCE FOUNDATION INCORPORATED307 WEST 38TH STREET SUITE 1105 NEW YORK, NY 10018	23-7012069		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
JOSHUA M FREEMAN FOUNDATION36097 SAND COVE ROAD SELBYVILLE, DE 19975	20-8592383		5,000				PRESENTATION SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUMP-START PERFORMANCE COMPANY108 BLUE STAR SAN ANTONIO,TX 78204	74-2371461		5,815				PRESENTATION SUPPORT
JUNIATA COLLEGE 1700 MOORE ST HUNTINGDON,PA 16652	23-1352652		14,000				PRESENTATION SUPPORT
KATE WEARE COMPANY174 26TH STREET 9J BROOKLYN,NY 11232	13-4176262		35,500				PRODUCTION & GENERAL OPERATING SUPPORT
KEAN UNIVERSITY - KEAN STAGE1000 MORRIS AVENUE UNION,NJ 07083	22-2960726		10,000				PRESENTATION SUPPORT
KRAVIS CENTER FOR THE PERFORMING ARTS701 OKEECHOBEE BOULEVARD WEST PALM BEACH, FL 334016323	59-2245054		8,000				PRESENTATION SUPPORT
LAGUNA DANCE FESTIVALPO BOX 897 LAGUNA BEACH,CA 92652	86-1154557		5,000				PRESENTATION SUPPORT
LAKEWOOD HERITAGE CULTURE AND ARTS DIVISION 470 SOUTH ALLISON PARKWAY DENVER,CO 80226	84-0593908		6,500				PRESENTATION SUPPORT
LATINO CULTURAL CENTER2600 LIVE OAK STREET DALLAS,TX 75204	84-1628586		5,000				PRESENTATION SUPPORT
LEGION ARTS1103 THIRD STREET SOUTHEAST CEDAR RAPIDS,IA 524012305	42-1154136		20,000				PRESENTATION SUPPORT
LINCOLN CENTER FOR THE PERFORMING ARTS 70 LINCOLN CENTER PLAZA 9TH FLOOR NEW YORK,NY 100236584	13-1847137		6,500				PRESENTATION SUPPORT
LINKS HALL3435 NORTH SHEFFIELD SUITE 207 CHICAGO,IL 60657	36-3135652		5,560				PRESENTATION SUPPORT
LONG ISLAND UNIVERSITY - TILLES CENTER720 NORTHERN BOULEVARD BROOKVILLE,NY 11548	11-1633516		10,000				PRESENTATION SUPPORT
LUCKY PLUSH PRODUCTIONS301 OLMSTED ROAD RIVERSIDE,IL 60546	36-4490783		61,500				PRODUCTION & GENERAL OPERATING SUPPORT
MAGGIE ALLESEE NATIONAL CENTER FOR CHOREOGRAPHY FLORIDA STATE UNIVERSITY 201 MONTGOMERY GYM TALLAHASSEE,FL 32306	59-1961248		7,200				PRESENTATION SUPPORT
MANSHIP THEATRE 100 LAFAYETTE STREET BATON ROUGE,LA 70801	20-3999559		10,000				PRESENTATION SUPPORT
MAPP INTERNATIONAL PRODUCTIONS140 SECOND AVENUE SUITE 502 NEW YORK,NY 10003	20-4725265		70,500				PRODUCTION & GENERAL OPERATING SUPPORT
MERRIMACK COLLEGE ROGERS CENTER FOR THE ARTSMERRIMACK COLLEGE 315 TURNPIKE ST NORTH ANDOVER, MA 01845	04-2103731		6,250				PRESENTATION SUPPORT
MIAMI LIGHT PROJECT INCORPORATEDPO BOX 1048 MIAMI,FL 33137	65-0107810		24,000				PRESENTATION SUPPORT
MUSEUM OF CONTEMPORARY ART (MCA)220 EAST CHICAGO AVENUE CHICAGO,IL 606112643	36-6154098		7,750				PRESENTATION SUPPORT
MUSIC CENTER PERFORMING ARTS CENTER OF LOS ANGELES COUNTY 135 NORTH GRAND AVENUE LOS ANGELES,CA 90012	95-2217011		10,000				PRESENTATION SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NETWORK OF ENSEMBLE THEATERS1709 N AVE 56 LOS ANGELES, CA 90042	72-1583726		50,000				PRODUCTION SUPPORT
NEW HAVEN INTERNATIONAL FESTIVAL OF ARTS AND IDEAS INC195 CHURCH STREET 12TH FLOOR NEW HAVEN, CT 06510	06-1444222		10,000				PRESENTATION SUPPORT
NEW JERSEY PERFORMING ARTS CENTER (NJPAC)ONE CENTER STREET NEWARK, NJ 07102	22-2889703		10,000				PRESENTATION SUPPORT
NEW YORK LIVE ARTS INCORPORATED219 WEST 19TH STREET NEW YORK, NY 10011	13-6206608		68,500				PRODUCTION & GENERAL OPERATING SUPPORT
NEWART NEW MEXICO208 13TH STREET NW B ALBUQUERQUE, NM 87102	85-0321133		14,000				PRESENTATION SUPPORT
NORTH AMERICAN FAMILY INSTITUTE - MA CHAPTER26 HOWLEY STREET PEABODY, MA 01960	04-2921507		16,425				PRESENTATION SUPPORT
NORTON CENTER FOR THE ARTS600 W WALNUT ST DANVILLE, KY 40422	61-0444671		10,000				PRESENTATION SUPPORT
ODC (OBERLIN DANCE COLLECTIVE OF CALIFORNIA)351 SHOTWELL STREET SAN FRANCISCO, CA 94110	94-3372711		13,500				PRESENTATION SUPPORT
OHIO STATE UNIVERSITY WEXNER CENTER FOR THE ARTS1871 NORTH HIGH STREET COLUMBUS, OH 43210	31-6025986		56,850				DEVELOPMENT & PRESENTATION SUPPORT
OLD TOWN TEMECULA COMMUNITY THEATER42051 MAIN STREET TEMECULA, CA 92590	33-0383649		10,000				PRESENTATION SUPPORT
ON THE BOARDSP.O BOX 19515 SEATTLE, WA 981091515	91-1081983		16,500				PRESENTATION SUPPORT
OPERA HOUSE ARTS AT THE STONINGTON OPERA HOUSE1 SCHOOL STREET P.O BOX 56 STONINGTON, ME 04681	01-0526734		6,890				PRESENTATION SUPPORT
ORANGE COUNTY PERFORMING ARTS CENTER600 TOWN CENTER DR COSTA MESA, CA 92626	23-7287150		9,000				PRESENTATION SUPPORT
OVERTURE CENTER FOUNDATION201 STATE STREET MADISON, WI 53703	01-0645482		5,000				PRESENTATION SUPPORT
PAINTED BRIDE ART CENTER230 VINE STREET PHILADELPHIA, PA 19106	23-1946391		5,725				PRESENTATION SUPPORT
PALISSIMO INC875 WEST 181ST STREET SUITE 5H NEW YORK, NY 10033	80-0117621		70,500				PRODUCTION & GENERAL OPERATING SUPPORT
PAUL TAYLOR DANCE FOUNDATION INCORPORATED551 GRAND STREET NEW YORK, NY 10002	13-2665475		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
PENNSYLVANIA STATE UNIVERSITY CENTER FOR THE PERFORMING ARTS 0101 EISENHOWER AUDITORIUM UNIVERSITY PARK, PA 168022104	24-6000376		7,500				PRESENTATION SUPPORT
PERFORMANCE ZONE INC (AKA THE FIELD)161 SIXTH AVENUE 14TH FLOOR NEW YORK, NY 10013	13-3357408		101,500				PRODUCTION & GENERAL OPERATING SUPPORT
PHILADELPHIA DANCE COMPANY9 NORTH PRESTON STREET PHILADANCO WAY PHILADELPHIA, PA 19104	23-7161084		35,500				PRODUCTION & GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PORTLAND INSTITUTE FOR CONTEMPORARY ART (PICA)415 SOUTHWEST 10TH AVENUE SUITE 300 PORTLAND,OR 97205	93-1177971		43,620				DEVELOPMENT & PRESENTATION SUPPORT
PORTLAND OVATIONS50 MONUMENT SQUARE 2ND FLOOR PORTLAND,ME 04101	01-0350707		19,910				PRESENTATION SUPPORT
REAL ART WAYS INCORPORATED56 ARBOR STREET HARTFORD,CT 06106	06-0958072		16,000				PRESENTATION SUPPORT
REDFERN ARTS CENTER ON BRICKYARD POND KEENE STATE COLLEGE229 MAIN STREET KEENE,NH 034352401	02-6000937		14,700				PRESENTATION SUPPORT
RIVER ARTS OF MORRISVILLEPO BOX 829 74 PLEASANT STREET MORRISVILLE,VT 05661	03-0368569		5,000				DEVELOPMENT & PRESENTATION SUPPORT
ROCKINGHAM ARTS & MUSEUM PROJECT 7 CANAL STREET 115 BELLOWS FALLS,VT 05171	03-0368205		26,000				PLANNING, DEVELOPMENT & PRESENTATION SUPPORT
ROSE KENNEDY GREENWAY CONSERVANCY185 KNEELAND ST 7TH FLOOR BOSTON,MA 02110	20-1678932		75,000				PLANNING & DEVELOPMENT SUPPORT
ROUND HOUSE THEATRE4545 EAST-WEST HIGHWAY BETHESDA,MD 20814	52-1289737		7,000				PRESENTATION SUPPORT
ROY AND EDNA DISNEYCALARTS THEATER-REDCAT CALIFORNIA INSTITUTE OF THE ARTS 631 WEST 2ND STREET LOS ANGELES,CA 90012	95-6102146		25,200				DEVELOPMENT & PRESENTATION SUPPORT
SAN FRANCISCO PERFORMANCES500 SUTTER STREET SUITE 710 SAN FRANCISCO,CA 941021107	94-2600147		5,000				PRESENTATION SUPPORT
SARASOTA BALLET OF FLORIDA5555 N TAMIA MI TRAIL SARASOTA,FL 34243	65-0135900		15,000				PRESENTATION SUPPORT
SCOTTSDALE CULTURAL COUNCIL 7380 EAST SECOND STREET SCOTTSDALE,AZ 852515604	86-0593786		22,850				PRESENTATION SUPPORT
SEATTLE THEATRE GROUP911 PINE STREET SEATTLE,WA 98101	94-3130227		8,200				PRESENTATION SUPPORT
SHEN WEI DANCE ARTS135 WEST 29TH STREET SUITE 1100 NEW YORK,NY 10001	06-1634051		50,500				PRODUCTION & GENERAL OPERATING SUPPORT
SILVERMINE ARTS CENTER1037 SILVERMINE ROAD NEW CANAAN,CT 06840	06-0674168		5,500				PRESENTATION SUPPORT
SOMERVILLE ARTS COUNCIL50 EVERGREEN AVE SOMERVILLE,MA 021452819	04-6001414		5,500				PLANNING & DEVELOPMENT SUPPORT
SPACE GALLERY538 CONGRESS STREET PORTLAND,ME 04101	51-0432635		7,800				PRESENTATION SUPPORT
SPOLETO FESTIVAL USA14 GEORGE STREET CHARLESTON,SC 29402	57-0660848		8,000				PRESENTATION SUPPORT
SPRINGBOARD FOR THE ARTS308 PRINCE STREET SUITE 270 ST PAUL,MN 55101	41-1690483		67,500				PRODUCTION & GENERAL OPERATING SUPPORT
STATE THEATRE REGIONAL ARTS CENTER AT NEW BRUNSWICK INCORPO15 LIVINGSTON AVENUE NEW BRUNSWICK,NJ 08901	16-1616384		5,000				PRESENTATION SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SWARTHMORE COLLEGE DEPARTMENT OF MUSIC DANCE 500 COLLEGE AVENUE SWARTHMORE, PA 19081	23-1352683		8,000				PRESENTATION SUPPORT
TEATRO VISIN365 SOUTH MARKET STREET SAN JOSE, CA 95113	77-0266551		14,000				PRESENTATION SUPPORT
THE BUILDERS ASSOCIATION453 BROOME STREET 4C NEW YORK, NY 10013	13-3852592		50,000				PRODUCTION SUPPORT
THE JOHN AND MABLE RINGLING MUSEUM OF ART5401 BAY SHORE ROAD SARASOTA, FL 34243	59-6214423		5,000				PRESENTATION SUPPORT
THE REGENTS OF THE UNIVERSITY OF CALIFORNIAOFFICE OF CONTRACT GRANT ADMINISTRATION 11000 KINROSS BLDG SUITE 211 LOS ANGELES, CA 90095	95-6006143		10,000				PRESENTATION SUPPORT
THE SARATOGA INTERNATIONAL THEATER INSTITUTE 520 8TH AVENUE SUITE 310 NEW YORK, NY 10018	13-3730731		50,000				PRODUCTION SUPPORT
THE THEATER OFFENSIVE565 BOYLSTON STREET 3RD FLOOR BOSTON, MA 02116	04-3039900		5,000				PLANNING & DEVELOPMENT SUPPORT
TITAS2100 ROSS AVENUE SUITE 650 DALLAS, TX 75201	75-1860146		8,000				PRESENTATION SUPPORT
TRISHA BROWN COMPANY INCORPORATED465 GREENWICH STREET NEW YORK, NY 10013	51-0173127		45,500				PRODUCTION & GENERAL OPERATING SUPPORT
UNIVERSITY OF ARIZONAUA PRESENTS PO BOX 3308 TUCSON, AZ 857223308	74-2652689		6,000				PRESENTATION SUPPORT
UNIVERSITY OF CALIFORNIA SANTA UNIVERSITY OF CALIFORNIA SANTA BARBARA BUILDING 402 SANTA BARBARA, CA 931065030	95-6006145		10,000				PRESENTATION SUPPORT
UNIVERSITY OF FLORIDA PERFORMING ARTS 315 HULL ROAD PO BOX 112750 GAINESVILLE, FL 326112750	59-6002502		10,000				PRESENTATION SUPPORT
UNIVERSITY OF MARYLAND CLARICE SMITH PERFORMING ARTS CENTERSUITE 3800 UNIVERSITY OF MARYLAND COLLEGE PARK, MD 207421625	52-2197313		17,000				PRESENTATION SUPPORT
UNIVERSITY OF MASSACHUSETTS FINE ARTS CENTER 151 PRESIDENTS DRIVE 2 CURRY HICKS PO BOX 1810 AMHERST, MA 01003	04-3167352		23,800				PRESENTATION SUPPORT
UNIVERSITY OF MINNESOTA NORTHROP DANCE SERIESUITE 750 2829 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414	41-6007513		6,000				PRESENTATION SUPPORT
UNIVERSITY OF NOTRE DAME DEBARTOLO CENTER FOR THE PERFORMING ARTS 100 PERFORMING ARTS CENTER NOTRE DAME, IN 46556	35-0868188		21,500				PRESENTATION SUPPORT
UNIVERSITY OF TEXAS AT AUSTIN - PERFORMING ARTS CENTER2350 ROBERT DEDMAN DRIVE AUSTIN, TX 78712	37-2172172		10,000				PRESENTATION SUPPORT
UNIVERSITY OF VERMONT85 SOUTH PROSPECT STREET 349 WATERMAN BUILDING BURLINGTON, VT 054050160	03-0179440		5,361				PRESENTATION SUPPORT
UW WORLD SERIES AT MEANY HALL UNIVERSITY OF WASHINGTONOFFICE OF SPONSORED PROGRAMS 4333 BROOKLYN AVE NE SEATTLE, WA 98195	91-6001537		5,000				PRESENTATION SUPPORT
VIRGINIA COMMONWEALTH UNIVERSITY - DEPARTMENT OF DANCE AND C800 E LEIGH ST STE 113 BOX 980568 RICHMOND, VA 23298	54-6001758		5,000				PRESENTATION SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VSA ARTS OF NEW MEXICO4904 FOURTH STREET NW ALBUQUERQUE, NM 871073906	85-0303750		5,000				PRESENTATION SUPPORT
WALKER ART CENTER 1750 HENNEPIN AVENUE MINNEAPOLIS, MN 55403	41-0693929		6,300				DEVELOPMENT & PRESENTATION SUPPORT
WESLEYAN UNIVERSITYCENTER FOR THE ARTS 283 WASHINGTON TERRACE MIDDLETOWN, CT 064590442	06-0646959		19,985				PRESENTATION SUPPORT
WHITE BIRD5620 SOUTHWEST EDMONT PLACE PORTLAND, OR 97239	93-1263353		19,000				PRESENTATION SUPPORT
WITTENBERG UNIVERSITYWARD ST AT N WITTENBERG AVE PO BOX 720 SPRINGFIELD, OH 455010720	31-0537177		12,500				PRESENTATION SUPPORT
WORLD MUSIC INCORPORATED720 MASSACHUSETTS AVENUE CAMBRIDGE, MA 021390213	22-3036665		29,500				PRESENTATION SUPPORT
YARD INCORPORATEDPO BOX 405 CHILMARK, MA 025350405	23-7348937		16,287				PRESENTATION SUPPORT
YERBA BUENA CENTER FOR THE ARTS701 MISSION STREET SAN FRANCISCO, CA 941033138	94-3042571		27,900				PRESENTATION SUPPORT
ZEITERION THEATRE INCORPORATED684 PURCHASE STREET PO BOX 4084 NEW BEDFORD, MA 02740	04-2845276		12,000				PRESENTATION SUPPORT
Z-SPACE STUDIO499 ALABAMA STREET 450 SAN FRANCISCO, CA 94110	94-3177230		15,000				PRESENTATION SUPPORT

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED

Employer identification number
04-2593591

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

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefitting Interested Persons.

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

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

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) GEETA AIYER PRINCIPAL BOSTON COMM	NEFA BOARD MEMBER	1,723	INVESTMENT MGMT FEES PAID		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED

Employer identification number

04-2593591

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE BEFORE SUBMISSION, AND SIGNED BY THE COO OR THE EXECUTIVE DIRECTOR
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUAL STATEMENTS ARE REVIEWED BY THE BOARD CHAIR (FOR BOARD MEMBERS) OR EXECUTIVE DIRECTOR (FOR STAFF MEMBERS) AND,IN THE EVENT OF A CONFLICT, ACTION AS DEFINED IN THE CONFLICT OF INTEREST POLICY IS TAKEN
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE DIRECTOR'S PERFORMANCE IS EVALUATED ANNUALLY BY THE CHAIR OF THE BOARD OF DIRECTORS WITH INVOLVEMENT OF OTHER MEMBERS OF THE COMPENSATION COMMITTEE AS APPROPRIATE. THE COMPENSATION COMMITTEE ANNUALLY REVIEWS AND SETS EXECUTIVE DIRECTOR COMPENSATION AND BENEFITS WITH REFERENCE TO COMPARABLES OF SIMILAR AGENCIES AND NON-PROFIT ORGANIZATIONS. THE BOARD AND THE COMPENSATION COMMITTEE KEEP MINUTES TO DOCUMENT KEY DISCUSSION POINTS AND DECISIONS REACHED. THE COMPENSATION COMMITTEE CONSISTS OF THE OFFICERS OF THE BOARD. THE COMPENSATION OF OTHER EMPLOYEES IS REVIEWED AND APPROVED ANNUALLY BY THE CHAIR OF THE BOARD OF DIRECTORS.
	FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE MADE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -266,270
	FORM 990, PART XII, LINE 2C	THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF THE INDEPENDENT ACCOUNTANT

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment
Sequence No 179

Department of the Treasury
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED	Business or activity to which this form relates FORM 990 PAGE 10	Identifying number 04-2593591
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Part I

Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7	Listed property Enter the amount from line 29	7		
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9	Tentative deduction Enter the smaller of line 5 or line 8	9		
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10		
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13	Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13		

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	59,645

Part III

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV

Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	59,645
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

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

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

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

Section B—Information on Use of Vehicles

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

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

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

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

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year (see instructions)					
43 Amortization of costs that began before your 2011 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	