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Return of Organization Exempt From Income Tax

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

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

A For the 2011 calendar year, or tax year beginning NOV 1, 2011 and ending OCT 31, 2012

<input type="checkbox"/> 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 <input type="checkbox"/> Return <input type="checkbox"/> Application pending	C Name of organization NEW YORK COUNCIL FOR THE HUMANITIES		D Employer identification number 51-0152266	
	Doing Business As		E Telephone number 212-233-1131	
	Number and street (or P.O. box if mail is not delivered to street address) 150 BROADWAY, SUITE 1700		Room/suite	
	City or town, state or country, and ZIP + 4 NEW YORK, NY 10038		G Gross receipts \$ 1,836,187.	
	F Name and address of principal officer: SARA OGGER SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	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		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
J Website: ► WWW.NYHUMANITIES.ORG		H(c) Group exemption number ►		
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: 1975 M State of legal domicile: NY		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE MISSION OF THE NEW YORK COUNCIL FOR THE HUMANITIES IS TO HELP ALL NEW YORKERS BECOME	RECD 10/15/13 OCDEN U 17 3 10/15/13 17 4 10/15/13 17 5 10/15/13 11 6 10/15/13 8 7a 10/15/13 0. 7b 10/15/13 0.		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets	10/15/13		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10/15/13	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10/15/13	17
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	10/15/13	11
	6 Total number of volunteers (estimate if necessary)	6	10/15/13	8
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	10/15/13	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	10/15/13	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)	1,479,191.	1,713,821.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,286.	14,355.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,092.	25,366.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,428.	2,768.	
		1,508,997.	1,756,310.	
		485,698.	389,842.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	Current Year	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	688,816.	722,579.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	
	b Total fundraising expenses (Part IX, column (D), line 25) ► 113,082.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	742,733.	744,270.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,917,247.	1,856,691.	
19 Revenue less expenses. Subtract line 18 from line 12	<408,250.►	<100,381.►		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)	940,085.	821,741.	
	22 Net assets or fund balances Subtract line 21 from line 20	289,691.	256,290.	
		650,394.	565,451.	

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	► <input type="checkbox"/> Signature of officer	Date 9/13/13	
	► SARA OGGER, EXECUTIVE DIRECTOR		
Type or print name and title			
Paid	Print/Type preparer's name DONALD SHAEFITZ	Preparer's signature 	Date 9/11/13 Check <input type="checkbox"/> if self-employed PTIN P00449034
Preparer	Firm's name ► LUTZ AND CARR, CPAS LLP	Firm's EIN ► 13-1655065	
Use Only	Firm's address ► 300 EAST 42ND STREET NEW YORK, NY 10017	Phone no. 212-697-2299	

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

G16

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:

THE MISSION OF THE NEW YORK COUNCIL FOR THE HUMANITIES IS TO HELP ALL NEW YORKERS BECOME THOUGHTFUL PARTICIPANTS IN OUR COMMUNITIES BY PROMOTING CRITICAL INQUIRY, CULTURAL UNDERSTANDING, AND CIVIC ENGAGEMENT.

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 \$ 583,725. including grants of \$ 389,842.) (Revenue \$ _____)**GRANTS PROGRAM:**

THE COUNCIL'S GRANTS PROGRAM, AVAILABLE TO ANY TAX-EXEMPT ORGANIZATION IN NEW YORK STATE, IS COMPETITIVE AND ONLINE APPLICATION-BASED. HIGHLY QUALIFIED STAFF AND A PANEL OF OUTSIDE EXPERTS CONDUCT A RIGOROUS REVIEW OF EACH PROPOSAL'S SCHOLARLY MERITS AND VALUE TO THE PUBLIC, AND AWARD DECISIONS ARE THEN MADE BY A SUB-COMMITTEE OF THE COUNCIL'S BOARD OF DIRECTORS. DURING FY 12 THE COUNCIL AWARDED 124 GRANTS TOTALING \$378,942 IN SUPPORT.

BASED ON ATTENDANCE AT THE PUBLIC EVENTS, THESE GRANTS HELPED REACH NEARLY 650,000 NEW YORKERS IN PERSON, AND OVER 500,000 NEW YORKERS THROUGH RADIO, TELEVISION & ONLINE PROGRAMS.

THE COUNCIL COORDINATED A STATEWIDE COMMEMORATION OF THE BICENTENNIAL

4b (Code _____) (Expenses \$ 201,553. including grants of \$ _____) (Revenue \$ 13,244.)**SPEAKERS IN THE HUMANITIES:**

FUNDS IN THE AMOUNT OF \$125,469 WERE EXPENDED ON HONORARIA AND TRAVEL FOR THIS LECTURE BUREAU DURING FY 12. IN THIS TIME, THE COUNCIL AWARDED 318 SPEAKERS EVENTS, WHICH WERE ATTENDED BY MORE THAN 15,000 NEW YORKERS IN 38 OF 62 COUNTIES IN NEW YORK STATE. MANY OF THE ORGANIZATIONS THAT BOOK SPEAKERS EVENTS SERVE AN ELDERLY AUDIENCE, THOUGH THE PROGRAM ALSO REACHES AUDIENCES WITH SPECIFIC INTERESTS, SUCH AS WOMEN, ETHNIC HERITAGE GROUPS, AND LABORERS.

ALL SPEAKERS PROGRAMS ARE OFFERED FREE TO THE GENERAL PUBLIC. IN ADDITION TO LECTURE-CONTENT, EACH OFFERING MUST ALLOW TIME FOR INTERACTION WITH THE AUDIENCE IN THE FORM OF Q&A.

THIS PROGRAM IMPACTS THE LIVES OF NEW YORKERS BY ALLOWING COMMUNITY

4c (Code _____) (Expenses \$ 159,803. including grants of \$ _____) (Revenue \$ _____)**TOGETHER-BOOK TALK FOR KIDS AND PARENTS:**

FUNDS IN THE AMOUNT OF \$159,803 WERE EXPENDED ON THE PROGRAM IN FY 12. THIS PROGRAM OFFERS A FORUM FOR PARENTS AND THEIR 9- TO 11-YEAR-OLD CHILDREN TO COME TOGETHER TO TALK ABOUT BOOKS AND IDEAS AT THEIR LOCAL LIBRARY. THIS INTER-GENERATIONAL PROGRAM DRAWS ON THE THEMES DEVELOPED FOR NEH'S "WE THE PEOPLE" BOOKSHELF TO ENCOURAGE PARENTS AND THEIR UPPER ELEMENTARY SCHOOL CHILDREN TO ENGAGE WITH IMPORTANT ISSUES AND IDEAS ABOUT AMERICAN IDENTITY AND LIFE IN A LIBRARY SETTING. EACH OF THE SIX 90-MINUTE TOGETHER SESSIONS IS CO-FACILITATED BY A LIBRARIAN AND A HUMANITIES SCHOLAR FROM THE LOCAL COMMUNITY. THE SESSIONS ALTERNATE BETWEEN PICTURE BOOKS AND NOVELS ON THE 18-BOOK TOGETHER LIST, ALL OF WHICH EXPLORE KEY THEMES IN AMERICAN LIFE SUCH AS COURAGE,

4d Other program services (Describe in Schedule O)

(Expenses \$ 524,454. including grants of \$ _____) (Revenue \$ 3,879.)4e Total program service expenses ► 1,469,535.

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, *Schedule of Contributors*?

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

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

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

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

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.

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- 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
- 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
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- 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

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

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, Parts I and IV

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV

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

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	X	
2	X	
3		X
4	X	
5		X
6		X
7		X
8		X
9		X
10		X
11a	X	
11b	X	
11c		X
11d		X
11e		X
11f	X	
12a	X	
12b		X
13		X
14a		X
14b		X
15		X
16		X
17		X
18		X
19		X
20a		X
20b		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25	24a	X
24b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
24c	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	
24d	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
26	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	26	X
27	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	27	X
28	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	28a	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28b	X
28a	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	X
28b	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	29	X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	30	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	31	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	32	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	33	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	34	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	35a	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35b	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	36	X
35b	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)? If "Yes," complete Schedule R, Part V, line 2	37	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	38	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		
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.		

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	114
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	11
2b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		
3b	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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.	X	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		
5b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	X	
5c	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	a 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		
7b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
7d	d If "Yes," indicate the number of Forms 8282 filed during the year		
7e	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	X	
7f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	X	
7g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	a Did the organization make any taxable distributions under section 4966?		
9b	b Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	a Initiation fees and capital contributions included on Part VIII, line 12		
10b	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
11a	a Gross income from members or shareholders		
11b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	a Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O</i>		
13b	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	c Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		
14b	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	17	
1b		17	
2			X
3			X
4			X
5			X
6			X
7a			X
7b			X
8a		X	
8b		X	
9			X

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? 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?	X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	
13	Did the organization have a written whistleblower policy?	
14	Did the organization have a written document retention and destruction policy?	
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 b Other officers or key employees of the organization 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? 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?	X
16b		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► NY
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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 during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► SARA OGGER - 212-233-1131
	150 BROADWAY SUITE 1700, NEW YORK, NY 10038

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
 Check if Schedule O contains a response to any question in this Part VII

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

 Check this box if neither the organization nor any related organization compensated any current 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			
(1) MATTHEW BENDER BOARD MEMBER	1.00	X					0.	0.	0.
(2) RICHARD BERNSTEIN BOARD MEMBER	1.00	X					0.	0.	0.
(3) RALPH J. BLASTING BOARD MEMBER	1.00	X					0.	0.	0.
(4) DONALD BOSWELL BOARD MEMBER	1.00	X					0.	0.	0.
(5) JONATHAN CULLER BOARD MEMBER	1.00	X					0.	0.	0.
(6) ANNIE FIORILLA BOARD MEMBER	1.00	X					0.	0.	0.
(7) MICHAEL FRISCH BOARD MEMBER	1.00	X					0.	0.	0.
(8) MADHUR JAFFREY BOARD MEMBER	1.00	X					0.	0.	0.
(9) ELBRUN KIMMELMAN CHAIR	1.00	X	X				0.	0.	0.
(10) HUGO PEREZ BOARD MEMBER	1.00	X					0.	0.	0.
(11) ADAM W. PERRY BOARD MEMBER	1.00	X					0.	0.	0.
(12) JOANNA ROSE BOARD MEMBER	1.00	X					0.	0.	0.
(13) JOAN SHELLEY RUBIN BOARD MEMBER	1.00	X					0.	0.	0.
(14) NORM SILVERSTEIN BOARD MEMBER	1.00	X					0.	0.	0.
(15) MARION ROACH SMITH BOARD MEMBER	1.00	X	X				0.	0.	0.
(16) EDMUND SUTTON TREASURER	1.00	X	X				0.	0.	0.
(17) LAURA ZAPAFEL BOARD MEMBER	1.00	X					0.	0.	0.

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

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

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

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.

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	

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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	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	1a 1b 1c 1d 1e 1,539,188. 1f 174,633. ► 1,713,821.			
Program Service Revenue	2 a SPEAKER INCOME b c d e f All other program service revenue g Total. Add lines 2a-2f	Business Code 611600 ► 14,355.	14,355.		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a MISCELLANEOUS b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions.	(i) Real 91,903. (ii) Personal 79,877. (iii) Other 12,026. a b ► 12,026. a b ► 2,768. a b ► 2,768. ► 1,756,310.	13,340. ► 12,026. ► 2,768. ► 2,768. ► 17,123.		13,340. 12,026. 2,768. 2,768. 0. 25,366.

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	389,842.	389,842.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
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	229,040.	185,362.	29,987.	13,691.
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	363,286.	289,965.	46,908.	26,413.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	26,515.	21,129.	3,406.	1,980.
9 Other employee benefits	63,486.	51,436.	6,966.	5,084.
10 Payroll taxes	40,252.	32,321.	5,148.	2,783.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	26,896.		26,896.	
d Lobbying	40,196.		146.	40,050.
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	5,304.		5,304.	
g Other	185,350.	183,850.	500.	1,000.
12 Advertising and promotion				
13 Office expenses	127,906.	83,465.	36,524.	7,917.
14 Information technology				
15 Royalties				
16 Occupancy	166,159.	110,971.	44,544.	10,644.
17 Travel	118,726.	80,600.	36,008.	2,118.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,492.		24,492.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS	41,192.	37,109.	2,681.	1,402.
b STAFF RECRUITMENT	5,493.	3,485.	2,008.	0.
c MOVING/STORAGE	2,556.	0.	2,556.	0.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,856,691.	1,469,535.	274,074.	113,082.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	114,609.	1	13,359.
	2 Savings and temporary cash investments	10,992.	2	7,715.
	3 Pledges and grants receivable, net	237,559.	3	207,181.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	20,799.	9	22,950.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	192,724.		
	b Less accumulated depreciation	79,441.	10c	113,283.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	400,795.	12	439,697.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	17,556.	15	17,556.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	940,085.	16	821,741.
Liabilities	17 Accounts payable and accrued expenses	41,056.	17	43,502.
	18 Grants payable	248,635.	18	212,788.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		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	289,691.	26	256,290.
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	361,044.	27	477,295.
	28 Temporarily restricted net assets	289,350.	28	88,156.
	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	650,394.	33	565,451.
	34 Total liabilities and net assets/fund balances	940,085.	34	821,741.

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Part XI Reconciliation of Net AssetsCheck 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	1,756,310.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,856,691.
3	Revenue less expenses. Subtract line 2 from line 1	3	<100,381.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	650,394.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	15,438.
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	565,451.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
b Were the organization's financial statements audited by an independent accountant?
c If "Yes" to line 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.
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate 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?
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	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2011)

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

Employer identification number

NEW YORK COUNCIL FOR THE HUMANITIES

51-0152266

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

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

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

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

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

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

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

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

8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)

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

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

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

a Type I b Type II c Type III - Functionally integrated d Type III - Other

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

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

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

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

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

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

h Provide the following information about the supported organization(s)

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

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

Schedule A (Form 990 or 990-EZ) 2011

Part II

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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.")	1945384.	2141495.	1527670.	1479191.	1713821.	8807561.
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	1945384.	2141495.	1527670.	1479191.	1713821.	8807561.
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)						
6 Public support. Subtract line 5 from line 4						8807561.

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	1945384.	2141495.	1527670.	1479191.	1713821.	8807561.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,670.	20,739.	24,254.	9,284.	25,366.	104,313.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	3,954.	10,319.	217.	3,428.	2,768.	20,686.
11 Total support. Add lines 7 through 10						8932560.
12 Gross receipts from related activities, etc (see instructions)					12	27,641.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	98.60	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	98.84	%
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		X	
b 33 1/3% support test - 2010. If the organization did not check a 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 III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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 section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

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		<input type="checkbox"/>
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		<input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		<input type="checkbox"/>

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768
 (election under section 501(h)).

A Check ► if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ► if the filing organization checked box A and "limited control" provisions apply

 Limits on Lobbying Expenditures
 (The term "expenditures" means amounts paid or incurred.)

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount. Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. If zero or less, enter -0-

i Subtract line 1f from line 1c. If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount	263,668.	269,954.	245,862.	242,835.	1,022,319.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,533,479.
c Total lobbying expenditures	63,930.	77,455.	46,813.	40,196.	228,394.
d Grassroots nontaxable amount	65,917.	67,489.	61,466.	60,709.	255,581.
e Grassroots ceiling amount (150% of line 2d, column (e))					383,372.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011Open to Public
Inspection

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIESEmployer identification number
51-0152266**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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 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 Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(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 (ASC 958) relating to these items	
a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

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

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

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

	Amount
1c	
1d	
1e	
1f	

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

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 Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by

(i) unrelated organizations
 (ii) related organizations

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

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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		145,552.	48,926.	96,626.
d Equipment		47,172.	30,515.	16,657.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			►	113,283.

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) FIXED INCOME MUTUAL FUNDS	112,654.	END-OF-YEAR MARKET VALUE
(B) EQUITY MUTUAL FUNDS	327,043.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►	439,697.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ►

Part X Other Liabilities. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ►

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

132053
01-23-12

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

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,756,310.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	1,856,691.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3	<100,381. >
4 Net unrealized gains (losses) on investments	4	15,438.
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 through 8	9	15,438.
10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	<84,943. >

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	1,771,748.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	15,438.
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	15,438.
3 Subtract line 2e from line 1	3	1,756,310.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	
c Add lines 4a and 4b	4c	0.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,756,310.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	1,856,691.
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	1,856,691.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	
c Add lines 4a and 4b	4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,856,691.

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, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: MANAGEMENT HAS EVALUATED ALL INCOME TAX POSITIONS AND

CONCLUDED THAT NO DISCLOSURES RELATING TO UNCERTAIN TAX POSITIONS WERE

REQUIRED IN THE FINANCIAL STATEMENTS.

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIES

Employer identification number

51-0152266

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC 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
					(f1) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance		
ST. JOHN FISHER COLLEGE 3690 EAST AVENUE ROCHESTER, NY 14618	16-0746864		7,967.	0.				SEE PART IV.
THE BAOBAB CULTURAL CENTER 728 UNIVERSITY AVENUE ROCHESTER, NY 14607	20-4918167		10,000.	0.				SEE PART IV.
SYRACUSE UNIVERSITY 113 BOWNE HALL SYRACUSE, NY 13244	15-0532081		10,000.	0.				SEE PART IV.
STATEN ISLAND MUSEUM 75 STUYVESANT PLACE STATEN ISLAND, NY 10301	13-5564127							SEE PART IV.
COLUMBIA UNIVERSITY 615 W. 131ST STREET, ROOM 254 NEW YORK, NY 10027								SEE PART IV.
EPIC THEATRE CENTER 55 WEST 39TH STREET, ROOM 302 NEW YORK, NY 10018	13-5598093							SEE PART IV.
2 Enter total number of other organizations listed in the line 1 table								
3 Enter total number of other organizations listed in the line 1 table								

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2011)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WXXI PUBLIC BROADCASTING COUNCIL 280 STATE STREET, PO BOX 30021 ROCHESTER, NY 14614	16-0838086		10,000.	0.			SEE PART IV.
ASIAN AMERICAN WRITERS' WORKSHOP 1112 WEST 27TH STREET, SUITE 600 NEW YORK, NY 10001	13-3677911		10,000.	0.			SEE PART IV.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated 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

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

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ST. JOHN FISHER COLLEGE

(H) **PURPOSE OF GRANT OR ASSISTANCE:** SEE PART IV.

A DAY-LONG PROGRAM OF DISCUSSIONS EXPLORING THE INFLUENCE OF FREDERICK

DOUGLASS' TIME IN IRELAND AND ITS INFLUENCE ON HIS WORK AS AN AMERICAN ABOLITIONIST.

NAME OF ORGANIZATION OR GOVERNMENT: THE BAOBAB CULTURAL CENTER

(H) **PURPOSE OF GRANT OR ASSISTANCE:** SEE PART IV.

Part IV Supplemental Information

A YEAR-LONG SERIES OF COMMUNITY DIALOGUES, MANY OF THEM USING FILMS AS A CATALYST FOR DISCUSSION, FOCUSING ON THE THEMES OF: IDENTITY, EDUCATION, CULTURAL MOVEMENTS, PROTESTS MOVEMENTS, AND SPIRITUALITY.

NAME OF ORGANIZATION OR GOVERNMENT: SYRACUSE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: SEE PART IV.

A SERIES OF FOUR "REVIVALS" THAT USE PERFORMANCE AND DIALOGUE TO ENGAGE PARTICIPANTS ABOUT A RANGE OF ISSUES FROM PARTICIPATORY DEMOCRACY TO AGING.

NAME OF ORGANIZATION OR GOVERNMENT: STATEN ISLAND MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: SEE PART IV.

A COMMUNITY DIALOGUE AND EXHIBITION EXPLORING THE CONTESTED HISTORY OF THE UNDERGROUND RAILROAD ON STATEN ISLAND.

NAME OF ORGANIZATION OR GOVERNMENT: COLUMBIA UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: SEE PART IV.

A SERIES OF INTERLOCKING PROGRAMS DESIGNED TO ENGAGE A RANGE OF PUBLICS IN DISCUSSION ABOUT THE ROLE AND LEGACY OF GUANTANAMO THROUGH STAKEHOLDER DISCUSSIONS, MOBILE PHONE ENGAGEMENT, AND PUBLIC DISCUSSIONS.

NAME OF ORGANIZATION OR GOVERNMENT: EPIC THEATRE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SEE PART IV.

A FOUR-DAY FESTIVAL THAT USES ORIGINAL PLAYS TO EXPLORE VARIOUS HUMAN RIGHTS ISSUES THROUGH PERFORMANCE, DISCUSSION, AND WORKSHOPS.

NAME OF ORGANIZATION OR GOVERNMENT: WXXI PUBLIC BROADCASTING COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: SEE PART IV.

Part IV Supplemental Information

A SERIES OF RADIO REPORTS, CALL-IN PROGRAMS, AND A PUBLIC FORUM IN CONJUNCTION WITH AN EXHIBITION EXPLORING HISTORICAL, CULTURAL, AND SCIENTIFIC UNDERSTANDINGS OF RACE.

NAME OF ORGANIZATION OR GOVERNMENT: ASIAN AMERICAN WRITERS' WORKSHOP

(H) PURPOSE OF GRANT OR ASSISTANCE: SEE PART IV.

A SERIES OF ONLINE INTERVIEWS, DISCUSSIONS AND A CULMINATING SYMPOSIUM EXPLORING NEW SCHOLARSHIP ON CULTURAL IDENTITY.

ALL REGRANTEES ARE REQUIRED TO SIGN A GRANT AGREEMENT AT THE START OF THE GRANT PERIOD THAT OUTLINES THE COUNCIL'S TERMS AND CONDITIONS. AT THE END OF THE GRANT PERIOD, REGRANTEES ARE REQUIRED TO SUBMIT FINAL REPORTING, DETAILING HOW THE PROJECT PROCEEDED AND HOW PROJECT FUNDS WERE EXPENDED.

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIES

Employer identification number
51-0152266

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

THOUGHTFUL PARTICIPANTS IN OUR COMMUNITIES BY PROMOTING CRITICAL
INQUIRY, CULTURAL UNDERSTANDING, AND CIVIC ENGAGEMENT.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OF THE WAR OF 1812 IN PARTNERSHIP WITH THE STATE HISTORIAN AND STATE
ARCHIVES. NEW YORK'S ECONOMIC PROMINENCE AND LONG BORDER WITH CANADA
GAVE THE STATE A CENTRAL ROLE IN THIS WAR, AND OUR STATE'S EXPERIENCE
OF THE WAR, FROM THE MILITARIZATION OF THE GREAT LAKES TO THE DECISIVE
AMERICAN VICTORY AT PLATTSBURGH, IS CRITICAL TO UNDERSTANDING THE
DEVELOPING POLITICAL AND MILITARY MINDSET OF THE YOUNG UNITED STATES.
THROUGH WAR OF 1812 GRANTS, SPEAKERS IN THE HUMANITIES, AND SPEAKERS IN
THE SCHOOLS, THE NEW YORK COUNCIL FOR THE HUMANITIES PROVIDED DIVERSE
OPPORTUNITIES FOR NEW YORKERS ACROSS THE STATE TO REFLECT ON THE LEGACY
OF THE WAR OF 1812.

IN ADDITION, THE COUNCIL HAS AN EXCELLENT REPUTATION AS A GRANT-MAKER
AND ITS AWARDS CARRY AN IMPRIMATUR THAT HELPS GRANTEES LEVERAGE
ADDITIONAL SOURCES OF FUNDING FROM THEIR COMMUNITY. IN FY 12, GRANTED
ORGANIZATIONS RAISED \$1,777,111 IN COMMUNITY MATCHES ACROSS THE STATE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

AUDIENCES TO SHARE THE EXPERIENCE OF HIGH-QUALITY, THOUGHT-PROVOKING
LECTURE PROGRAMS AT LOCAL CULTURAL ORGANIZATIONS. CULTURAL
ORGANIZATIONS BENEFIT AS WELL BY BEING ABLE TO REACH NEW AUDIENCES,
GROW THEIR MEMBERSHIP, AND RAISE THEIR PROFILE IN THEIR COMMUNITIES.

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIES

Employer identification number

51-0152266

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

FREEDOM, AND BEING AMERICAN. THE TARGET AUDIENCE FOR THE PROGRAM IS FAMILIES WITH CHILDREN WHO NEED AND WANT ADDITIONAL SUPPORT, EXPERIENCES, AND RESOURCES IN THE AREA OF READING. THE COUNCIL SUPPLIES ALL THE BOOKS, CONTRACTS DIRECTLY WITH A SCHOLAR CO-FACILITATOR, AND PROVIDES THE LIBRARY WITH A \$1,000 STIPEND TO COVER NECESSARY EXPENSES SUCH AS CHILDCARE AND MATERIALS. SINCE 2009, THE COUNCIL HAS ALSO OFFERED A BILINGUAL (SPANISH/ENGLISH) VERSION OF THE PROGRAM CALLED UNIDOS. IN FY 12, THE PROGRAM WAS AWARDED TO 18 LIBRARIES (INCLUDING TWO UNIDOS PROGRAMS) ACROSS NEW YORK STATE IN 13 COUNTIES AND ALL 7 REGIONS OF NEW YORK STATE, REACHING 147 NEW FAMILIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:SPEAKERS IN THE SCHOOLS:

THE PROGRAM OFFERS FREE TOP-NOTCH LECTURES BY A RENOWNED AND DIVERSE GROUP OF SCHOLARS ON A WIDE VARIETY OF HUMANITIES SUBJECTS TO HIGH SCHOOL COMMUNITIES ACROSS NEW YORK STATE. THE COUNCIL COVERS ALL COSTS ASSOCIATED WITH THE PROGRAM, INCLUDING THE SPEAKER'S HONORARIA AND TRAVEL EXPENSES. FUNDS IN THE AMOUNT OF \$101,547 WERE EXPENDED DURING THE FISCAL YEAR. IN THIS TIME, THE COUNCIL AWARDED 133 EVENTS, WHICH WERE ATTENDED BY MORE THAN 10,000 NEW YORKERS IN 32 OF 62 COUNTIES IN NEW YORK STATE.

READING BETWEEN THE LINES:

THIS IS THE COUNCIL'S FACILITATED ADULT BOOK DISCUSSION PROGRAM, AVAILABLE BY APPLICATION TO ALL NEW YORK STATE TAX-EXEMPT ORGANIZATIONS. THERE IS NO FEE TO THE HOST ORGANIZATION TO APPLY FOR OR HOST A READING BETWEEN THE LINES SERIES. EACH OF THE FOUR 90-MINUTE

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIES

Employer identification number

51-0152266

SESSIONS IN A SERIES FOCUSES ON A BOOK SELECTED FOR ITS RELATION TO THE SERIES THEME. A HUMANITIES SCHOLAR FACILITATES THE DISCUSSION SESSIONS AND ENCOURAGES PARTICIPANTS TO ENGAGE WITH THE TEXTS AND WITH THE SERIES THEME. TOTAL EXPENSES WERE \$59,835.

MEANING OF SERVICE:

MEANING OF SERVICE IS THE COUNCIL'S READING AND DISCUSSION SERIES FOR AMERICORPS MEMBERS, AVAILABLE FREE OF CHARGE TO ANY NEW YORK STATE AMERICORPS PROGRAM. SESSIONS FEATURE FACILITATED CONVERSATIONS ABOUT SHORT PHILOSOPHICAL AND LITERARY TEXTS ON THE THEMES OF ASSOCIATING, SERVING, GIVING AND LEADING. MEANING OF SERVICE SESSIONS OFFER MEMBERS AN OPPORTUNITY TO SHARE THEIR SERVICE EXPERIENCE, AND REFLECT TOGETHER UPON WHY THEY CHOSE - AND CONTINUE TO CHOOSE - TO DEDICATE THEMSELVES TO SERVICE.

MEANING OF SERVICE READINGS ARE OFTEN TAKEN FROM THE CIVICALLY ENGAGED READER, A COLLECTION OF PROVOCATIVE SHORT READINGS ON CIVIC ACTIVITY, SELECTED ESPECIALLY FOR SERVICE AND VOLUNTEER GROUPS. READINGS DRAW ON A VARIETY OF POETIC, BIOGRAPHICAL, HISTORICAL AND FICTIONAL WORKS BY AUTHORS SUCH AS MARTIN LUTHER KING, JR., ARISTOTLE, JANE ADDAMS, PABLO NERUDA AND TONI CADE BAMBARA. A HUMANITIES SCHOLAR FROM THE COMMUNITY FACILITATES DISCUSSION ABOUT THE READING, ENCOURAGING MEMBERS TO EXPLORE THE THEMES OF THE TEXTS AND HOW THEY RELATE TO AMERICORPS SERVICE. TOTAL EXPENSES WERE \$62,819.

HUMANITIES CONVENING:

THE COUNCIL PARTNERS WITH OTHER LEADERSHIP ORGANIZATIONS THAT SHARE ITS GOALS TO BROADEN ITS PRESENCE ACROSS NEW YORK STATE. TOTAL EXPENSES WERE \$110,451.

132212
01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIES

Employer identification number
51-0152266LITERATURE & MEDICINE:

THIS PROGRAM ENCOURAGES PARTICIPANTS TO CONNECT THE WORLDS OF MEDICINE AND LIVED EXPERIENCE, GIVING THEM THE OPPORTUNITY TO REFLECT ON THEIR PROFESSIONAL ROLES AND RELATIONSHIPS THROUGH PLAYS, SHORT STORIES, POETRY, FICTION AND PERSONAL NARRATIVES IN A SETTING WHERE THEY CAN SHARE THEIR REFLECTIONS WITH COLLEAGUES. IT HAS A SIGNIFICANT EFFECT ON THE WAY PARTICIPANTS UNDERSTAND THEIR WORK, THEIR RELATIONSHIPS WITH PATIENTS AND WITH EACH OTHER. IT IS ALSO AN INNOVATIVE AND COST-EFFECTIVE WAY TO IMPROVE PATIENT CARE, AS OBSERVED BY A HOSPITAL ADMINISTRATOR: "THE REFLECTION AND CONVERSATION THAT TAKE PLACE IN THE PROCESS GREATLY ENHANCE THE LEVEL OF COOPERATION, COLLABORATION AND ESPRIT DE CORPS WITHIN OUR HOSPITAL FAMILY AND OUR COMMUNITY AT LARGE. THIS IMPETUS IN TURN GREATLY IMPROVES THE QUALITY OF CARE WE PROVIDE TO OUR PATIENTS AND THEIR FAMILIES." SINCE 1997, LITERATURE & MEDICINE, A PROGRAM CREATED BY THE MAINE HUMANITIES COUNCIL AND OFFERED IN PARTNERSHIP WITH OTHER STATE HUMANITIES COUNCILS, HAS REACHED HEALTH CARE PERSONNEL IN 28 STATES, PROVIDING THEM WITH FACILITATED READING AND DISCUSSION GROUPS THAT ALLOW THEM TO RECOGNIZE AND ADDRESS THE CHALLENGES THEY ROUTINELY FACE AS HEALTH CARE PROVIDERS. NEW YORK COUNCIL FOR THE HUMANITIES AND 12 OTHER STATE AND TERRITORIAL HUMANITIES COUNCILS NOW WORK WITH GROUPS OF HEALTH CARE PROFESSIONALS IN VA HEALTH CARE FACILITIES. TOTAL EXPENSES WERE \$40,617.

CONVERSATIONS BUREAU:

THE CONVERSATIONS BUREAU PROMOTES THOUGHTFUL, ENGAGED COMMUNITY DIALOGUE, USING A SHORT TEXT AND A SCHOLAR-FACILITATOR AS A GUIDE. THE FACILITATOR INTRODUCES THOUGHT-PROVOKING QUESTIONS AND ENCOURAGES

132212
01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

NEW YORK COUNCIL FOR THE HUMANITIES

Employer identification number
51-0152266

PARTICIPANTS TO REFLECT ON THE ISSUES RAISED BY THE READING AND DISCUSS HOW THEY IMPACT THEIR LIVES AND COMMUNITIES. CONVERSATIONS ARE 90-MINUTE DISCUSSIONS ON A RANGE OF HUMANITIES TOPICS RELATED TO AMERICAN IDENTITY.

ANY NOT-FOR-PROFIT ORGANIZATION OR HIGH SCHOOL IN NEW YORK STATE IS ELIGIBLE TO USE THE PROGRAM. THE COUNCIL COVERS THE COST OF THE SCHOLAR-FACILITATOR'S HONORARIUM AND TRAVEL EXPENSES. TOTAL EXPENSES WERE \$149,185.

EXPENSES \$ 524,454. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,879.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE OF THE BOARD PRIOR TO BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C: WE HAVE A CONFLICT OF INTEREST POLICY, WHICH EACH BOARD MEMBER AND KEY EMPLOYEE READS EACH YEAR, AND ALSO PROVIDE A "BEST-PRACTICES" DISCLOSURE FORM WITH SIGNATURE EACH YEAR.

FORM 990, PART VI, SECTION B, LINE 15: EXECUTIVE DIRECTOR: THE FOLLOWING PROCESS IS USED: THE EXECUTIVE DIRECTOR PREPARES A LIST OF GOALS ARRANGED BY AREA OF RESPONSIBILITY. THE EXECUTIVE DIRECTOR ALSO PREPARES A SELF-ASSESSMENT BASED ON GOALS AND WHETHER THEY ARE ACCOMPLISHED. BOTH DOCUMENTS ARE REVIEWED BY THE FULL BOARD. THE CHAIR OF THE BOARD SURVEYS THE FULL BOARD WITH A QUESTIONNAIRE BASED ON THE STATEMENT OF GOALS. THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS THE RESULTS OF THE SURVEY WITH THE EXECUTIVE DIRECTOR, THEN MAKES A RECOMMENDATION FOR SALARY ADJUSTMENT.

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.

132212
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FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:NET UNREALIZED GAINS ON INVESTMENTS:

15,438.

FORM 990, PART XI, QUESTION 2CTHE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTIONPROCESS DURING THE YEAR.

Depreciation and Amortization 990
(Including Information on Listed Property)

2011

Name(s) shown on return

Business or activity to which this form relates

Identifying number

NEW YORK COUNCIL FOR THE HUMANITIES

FORM 990 PAGE 10

51-0152266

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

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			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)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	24,492.

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	► <input type="checkbox"/>	

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 instr	22	24,492.
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	

116251
11-21-11 LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2011)

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **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.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle				
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)										
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?										
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

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	<input type="checkbox"/> Yes <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No
39 Do you treat all use of vehicles by employees as personal use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
41 Do you meet the requirements concerning qualified automobile demonstration use?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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
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42 Amortization of costs that begins during your 2011 tax year:

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

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions NEW YORK COUNCIL FOR THE HUMANITIES	Employer identification number (EIN) or 51-0152266
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions 150 BROADWAY, SUITE 1700	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10038	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

SARA OGGER

- The books are in the care of ► **150 BROADWAY SUITE 1700 - NEW YORK, NY 10038**

Telephone No ► **212-233-1131**

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **SEPTEMBER 15, 2013**.

5 For calendar year , or other tax year beginning **NOV 1, 2011**, and ending **OCT 31, 2012**.

6 If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return
 Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO COMPLETE THE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►

Title ► **DIRECTOR**

Date ►

Form 8868 (Rev. 1-2012)

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ►
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I. Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. NEW YORK COUNCIL FOR THE HUMANITIES	Employer identification number (EIN) or <input checked="" type="checkbox"/> 51-0152266
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 150 BROADWAY, SUITE 1700	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10038	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

SARA OGGER

- The books are in the care of ► **150 BROADWAY SUITE 1700 - NEW YORK, NY 10038**
Telephone No. ► **212-233-1131** FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

JUNE 15, 2013, to file the exempt organization return for the organization named above. The extension

is for the organization's return for

► calendar year or► tax year beginning **NOV 1, 2011**, and ending **OCT 31, 2012**.2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)