Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
NEW YORK FOUNDATION FOR THE ARTS INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
20 JAY STREET NO 740

City or town, state or country, and ZIP + 4
BROOKLYN, NY 11201

D Employer identification number
23-7129564

E Telephone number
(212) 366-6900

G Gross receipts $ 15,440,138

F Name and address of principal officer
MICHAEL ROYCE
20 JAY STREET NO 740
BROOKLYN,NY 11201

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ HTTP //WWW NYFA ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1971

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE NEW YORK FOUNDATION FOR THE ARTS' (NYFA) MISSION IS TO EMPOWER ARTISTS AT CRITICAL STAGES IN THEIR CREATIVE LIVES NYFA ACCOMPLISHES THIS BY OFFERING FINANCIAL ASSISTANCE AND INFORMATION TO ARTISTS AND ORGANIZATIONS THAT DIRECTLY SERVE ARTISTS, BY SUPPORTING ARTS PROGRAMMING IN THE COMMUNITY, AND BY BUILDING COLLABORATIVE RELATIONSHIPS WITH OTHERS WHO ADVOCATE FOR THE ARTS IN NEW YORK STATE AND THROUGHOUT THE COUNTRY EACH NYFA AWARDS CLOSE TO A $1 MILLION TO INDIVIDUAL ARTISTS AND SMALL AND EMERGING ORGANIZATIONS THROUGH ITS FELLOWSHIP AND OTHER GRANTING PROGRAMS NYFA'S LEARNING PROGRAMS SERVE THOUSANDS OF ARTISTS THROUGH WORKSHOPS, PANEL DISCUSSIONS, AND INDIVIDUAL MENTORING ON TOPICS RANGING FROM GRANT WRITING AND BUDGETING TO CREATING AN ARTIST PORTFOLIO AND AUDIENCE DEVELOPMENT THE FISCAL SPONSORSHIP PROGRAM IS ONE OF THE LARGEST AND MOST ESTABLISHED IN THE COUNTRY AND HELPS ARTISTS AND ORGANIZATIONS RAISE AND MANAGE OVER $3 MILLION ANNUALLY

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	23
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	38
6	Total number of volunteers (estimate if necessary)	6	19
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	5,663,096	13,937,330
	9	Program service revenue (Part VIII, line 2g)	884,109	1,090,515
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	17,945	18,028
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	59,461	40,176
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,624,611	15,086,049
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,566,347	10,630,296
	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)	1,769,739	1,663,446
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶561,756		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	993,243	1,096,404
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	7,329,329	13,390,146
	19	Revenue less expenses Subtract line 18 from line 12	-704,718	1,695,903

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	4,219,052	6,668,387
	21	Total liabilities (Part X, line 26)	497,883	1,245,723
	22	Net assets or fund balances Subtract line 21 from line 20	3,721,169	5,422,664

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

****** 2014-03-17
Signature of officer Date

MICHAEL ROYCE EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
FREDERICK H ROTHMAN				P01275277
Firm's name ▶ LOEB & TROPER LLP			Firm's EIN ▶ 13-1517563	
Firm's address ▶ 655 THIRD AVENUE 12TH FLOOR NEW YORK, NY 10017			Phone no (212) 867-4000	

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE NEW YORK FOUNDATION FOR THE ARTS' (NYFA) MISSION IS TO EMPOWER ARTISTS AT CRITICAL STAGES IN THEIR CREATIVE LIVES NYFA ACCOMPLISHES THIS BY OFFERING FINANCIAL ASSISTANCE AND INFORMATION TO ARTISTS AND ORGANIZATIONS THAT DIRECTLY SERVE ARTISTS, BY SUPPORTING ARTS PROGRAMMING IN THE COMMUNITY, AND BY BUILDING COLLABORATIVE RELATIONSHIPS WITH OTHERS WHO ADVOCATE FOR THE ARTS IN NEW YORK STATE AND THROUGHOUT THE COUNTRY EACH NYFA AWARDS CLOSE TO A $1 MILLION TO INDIVIDUAL ARTISTS AND SMALL AND EMERGING ORGANIZATIONS THROUGH ITS FELLOWSHIP AND OTHER GRANTING PROGRAMS NYFA'S LEARNING PROGRAMS SERVE THOUSANDS OF ARTISTS THROUGH WORKSHOPS, PANEL DISCUSSIONS, AND INDIVIDUAL MENTORING ON TOPICS RANGING FROM GRANT WRITING AND BUDGETING TO CREATING AN ARTIST PORTFOLIO AND AUDIENCE DEVELOPMENT THE FISCAL SPONSORSHIP PROGRAM IS ONE OF THE LARGEST AND MOST ESTABLISHED IN THE COUNTRY AND HELPS ARTISTS AND ORGANIZATIONS RAISE AND MANAGE OVER $3 MILLION ANNUALLY

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 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 $ 5,270,530 including grants of $ 4,945,115) (Revenue $ 467,209)

FISCAL SPONSORSHIP SINCE 1976, NYFA HAS PROVIDED FISCAL SPONSORSHIP TO INDIVIDUAL ARTISTS AND EMERGING ORGANIZATIONS, MAKING IT THE OLDEST PROGRAM OF ITS KIND IN THE COUNTRY IT MAKES IT POSSIBLE FOR INDIVIDUALS AND ORGANIZATIONS WITHOUT NOT-FOR-PROFIT STATUS TO RAISE FUNDS FOR UPCOMINGS FILMS, THEATRICAL PERFORMANCES, ART INSTALLATIONS AND OTHER PROJECTS

4b (Code) (Expenses $ 977,774 including grants of $ 718,306) (Revenue $ 0)

ARTIST FELLOWSHIPS IN 1984, NYFA WAS SELECTED BY THE NEW YORK STATE COUNCIL ON THE ARTS TO ADMINISTER THE STATE'S ARTISTS' FELLOWSHIPS THE PROGRAM HAS SINCE EXPANDED TO AWARD DIRECT GRANTS OF $7,000 EACH TO APPROXIMATELY 100 NEW YORK STATE ARTISTS EACH YEAR THESE FELLOWSHIPS ARE ARTIST CENTERED AND ALLOW ARTISTS THE FREEDOM TO USE THE GRANT IN WHATEVER MANNER WILL HAVE THE GREATEST IMPACT ON THEIR CREATIVE LIVES THE AWARDS ARE MADE IN 15 DIFFERENT DISCIPLINES

4c (Code) (Expenses $ 3,653,084 including grants of $ 3,652,326) (Revenue $ 0)

NEW YORK CITY THEATER PROGRAM THE ANDREW MELLON NEW YORK CITY THEATER PROGRAM HAS AWARDED OVER $5 MILLION IN GRANTS TO OVER 50 SMALL AND MID SIZED THEATER COMPANIES WITH BUDGETS UNDER $3 5 MILLION THE AWARDS CAN BE USED FOR EITHER CORE OR PROJECT SUPPORT

(Code) (Expenses $ 2,351,635 including grants of $ 1,314,549) (Revenue $ 623,306)

NYFA LEARNING PROGRAMS NYFA LEARNING PROGRAMS PROVIDES LEARNING OPPORTUNITIES TO THOUSANDS OF ARTISTS THROUGHOUT THE U S BY PROVIDING SEMINARS, WORKSHOPS, CONSULTATIONS, AND PANELIST OPPORTUNTIES NYFA INFORMATION NYFA'S SOURCE SECTION OF ITS WEBSITE IS VISITED BY MILLIONS OF USERS EACH YEAR SOURCE PROVIDES INFORMATION SUCH AS GRANT OPPORTUNITIES, RESIDENCIES, GALLERY SPACE, AND SEVERAL OTHER RESOURCES FOR ARTISTS AND ARTS ORGANIZATIONS NYFA EMERGENCY RELEIF FUND AS A RESPONSE TO HURRICANE SANDY, NYFA LAUNCHED THE EMERGENCY RELEIF PROGRAM TO ADMINISTER GRANTS TO ARTISTS THAT SUFFERED FINANCIAL LOSS RELATED TO THEIR ART WORKS DUE TO HURRICANE SANDY NYFA ADMINSTERED OVER $1 MILLION IN GRANTS TO OVER 450 ARTISTS

4d Other program services (Describe in Schedule O)

(Expenses $ 2,351,635 including grants of $ 1,314,549) (Revenue $ 623,306)

4e **Total program service expenses** ▶ 12,253,023

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
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*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16	Yes	
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	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*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	619			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
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	38			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23		
	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				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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 ▶MICHAEL ROYCE 20 JAY STREET SUITE 740 BROOKLYN, NY (212) 366-6900

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) J WHITNEY STEVENS CHAIR	10 00	X		X				0	0	0
(2) HOWARD ROTHMAN VICE CHAIR	10 00	X		X				0	0	0
(3) JOHN F WILLIAMS TREASURER	10 00	X		X				0	0	0
(4) MARGRET LOUIS SECRETARY	5 00	X		X				0	0	0
(5) KATHLEEN O'GRADY BOARD MEMBER	10 00	X						0	0	0
(6) NATHAN LYONS BOARD MEMBER	1 00	X						0	0	0
(7) MARNIE BLACK BOARD MEMBER	2 00	X						0	0	0
(8) JUDITH K BRODSKY BOARD MEMBER	2 00	X						0	0	0
(9) ANITA DURST BOARD MEMBER	2 00	X						0	0	0
(10) MARC JASON BOARD MEMBER	2 00	X						0	0	0
(11) KARL M KELLNER BOARD MEMBER	2 00	X						0	0	0
(12) LYNDA LOGAN BOARD MEMBER	2 00	X						0	0	0
(13) MAJORIE W MARTAY BOARD MEMBER	2 00	X						0	0	0
(14) DAVID SE NOBLE BOARD MEMBER	2 00	X						0	0	0
(15) PAULANNE QUEEN BOARD MEMBER	2 00	X						0	0	0
(16) RICHARD QUIGLEY BOARD MEMBER	1 00	X						0	0	0
(17) JOE REECE BOARD MEMBER	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
(18) CAROL ROSS BOARD MEMBER	2 00	X						0	0	0
(19) DAVID SHROEDER BOARD MEMBER	2 00	X						0	0	0
(20) MARJORIE SILVERMAN BOARD MEMBER	2 00	X						0	0	0
(21) TOBY USNIK BOARD MEMBER	2 00	X						0	0	0
(22) ELIZABETH YEE BOARD MEMBER	2 00	X						0	0	0
(23) SHANA C WATERMAN BOARD MEMBER	2 00	X						0	0	0
(24) MICHAEL ROYCE EXECUTIVE DIRECTOR	50 00			X				266,602	0	9,514
(25) MARK ROSSIER DEPUTY DIRECTOR	50 00			X				126,352	0	9,890
(26) SEBI VITALE DIRECTOR OF FINANCE	45 00			X				85,820	0	9,258
(27) DAVID TERRY DIRECTOR OF PROGRAMS	45 00			X				57,018	0	8,743

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	535,792	0	37,405

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 ▶3

			Yes	No
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*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶0

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . . ☐

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	280,821				
	d	Related organizations . . .	1d					
	e	Government grants (contributions)	1e	1,083,295				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	12,573,214				
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f . . . . ▶			13,937,330			
Program Service Revenue			Business Code					
	2a	PROGRAM SERVICE FEES	561499		604,911	604,911		
	b	ADMINISTRATIVE FEES	561000		485,604	485,604		
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f . . . . ▶			1,090,515			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶			15,512			15,512
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties . . . . ▶						
			(i) Real	(ii) Personal				
	6a	Gross rents	56,620					
	b	Less rental expenses	0					
	c	Rental income or (loss)	56,620					
	d	Net rental income or (loss) . . . . ▶			56,620			56,620
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	293,961					
	b	Less cost or other basis and sales expenses	291,445					
	c	Gain or (loss)	2,516					
	d	Net gain or (loss) . . . . ▶			2,516			2,516
	8a	Gross income from fundraising events (not including $ 280,821 of contributions reported on line 1c) See Part IV, line 18 . .	a	46,200				
	b	Less direct expenses . . .	b	62,644				
	c	Net income or (loss) from fundraising events . . ▶			-16,444			-16,444
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from gaming activities . . . ▶						
	10a	Gross sales of inventory, less returns and allowances .	a					
	b	Less cost of goods sold . .	b					
	c	Net income or (loss) from sales of inventory . . ▶						
		Miscellaneous Revenue	Business Code					
	11a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d . . . . . . ▶						
	12	**Total revenue.** See Instructions . . . . . ▶			15,086,049	1,090,515	0	58,204

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	4,009,611	4,009,611		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	6,583,229	6,583,229		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	37,456	37,456		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	588,216	402,171	101,623	84,422
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	860,814	474,953	157,817	228,044
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	19,359	11,616	4,065	3,678
9 Other employee benefits	72,528	43,517	15,231	13,780
10 Payroll taxes	122,529	73,518	25,731	23,280
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	26,174		26,174	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	1,525		1,525	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	124,883	47,751	74,985	2,147
12 Advertising and promotion	544	219	325	
13 Office expenses	154,978	114,338	4,637	36,003
14 Information technology				
15 Royalties . .				
16 Occupancy	285,282	182,295	45,645	57,342
17 Travel	44,594	21,700	19,610	3,284
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	25,289		25,289	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	251,225	160,533	40,196	50,496
23 Insurance	18,274	11,677	2,924	3,673
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 PROJECT PRODUCTION	87,230	38,125	3,131	45,974
b CREDIT AND BANK FEES	31,714	19,476	10,555	1,683
c HOSPITALITY	18,093	5,208	9,706	3,179
d PROFESSIONAL DEVELOPMEN	2,879	479	2,400	
e All other expenses	23,720	15,151	3,798	4,771
25 **Total functional expenses.** Add lines 1 through 24e	13,390,146	12,253,023	575,367	561,756
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**

Check if Schedule O contains a response to any question in this Part X . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		995,570	1	1,835,092
	2	Savings and temporary cash investments		1,997,048	2	3,171,266
	3	Pledges and grants receivable, net		224,639	3	885,080
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other 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) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		28,228	9	33,300
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,528,591			
	b	Less accumulated depreciation	10b 1,027,145	651,517	10c	501,446
	11	Investments—publicly traded securities		284,572	11	204,725
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		37,478	15	37,478
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		4,219,052	16	6,668,387
Liabilities	17	Accounts payable and accrued expenses		36,278	17	172,236
	18	Grants payable		167,174	18	672,929
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other 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		294,431	25	400,558
	26	**Total liabilities.** Add lines 17 through 25		497,883	26	1,245,723
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,062,371	27	1,262,368
	28	Temporarily restricted net assets		1,961,710	28	3,623,208
	29	Permanently restricted net assets		697,088	29	537,088
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,721,169	33	5,422,664
	34	Total liabilities and net assets/fund balances		4,219,052	34	6,668,387

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,086,049
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,390,146
3	Revenue less expenses Subtract line 2 from line 1	3	1,695,903
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,721,169
5	Net unrealized gains (losses) on investments	5	5,593
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,422,664

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

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 - Non-functionally integrated

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?

		Yes	No
(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?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	7,557,905	6,501,377	9,442,585	5,663,096	13,937,330	43,102,293
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	7,557,905	6,501,377	9,442,585	5,663,096	13,937,330	43,102,293
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)						7,890,930
6 **Public support.** Subtract line 5 from line 4						35,211,363

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	7,557,905	6,501,377	9,442,585	5,663,096	13,937,330	43,102,293
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	169,544	17,448	58,539	100,222	72,132	417,885
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)	40,872	55,512	26,015			122,399
11 **Total support** (Add lines 7 through 10)						43,642,577

12 Gross receipts from related activities, etc (see instructions) | 12 | 3,961,180

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | 80 680 %

15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 | 80 010 %

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2011.** 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—2012.** 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—2011.** 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

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

Facts And Circumstances Test

Explanation

SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME MISCELLANEOUS - 2008 AMOUNT $ 40,872 2009 AMOUNT $ 55,512 2010 AMOUNT $ 26,015

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

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? ☐ Yes ☐ No

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

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

- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ 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 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? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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 XIII, 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 XIII

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 XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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	772,838	819,822	507,165	763,483	929,506
b	Contributions			118,311	1,043	
c	Net investment earnings, gains, and losses	22,096	22,022	3,836	4,139	-161,523
d	Grants or scholarships			11,000	11,500	4,500
e	Other expenditures for facilities and programs	176,889	67,467			
f	Administrative expenses		1,539		250,000	
g	End of year balance	618,045	772,838	618,312	507,165	763,483

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 100 000 %

c Temporarily restricted endowment ▶ 0 %

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

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land				
b Buildings				
c Leasehold improvements		602,142	582,326	19,816
d Equipment		926,449	444,819	481,630
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				501,446

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		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

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

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

1 (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED RENT	135,932
DUE TO SPONSORED EMERGING ORGANIZATIONS	264,626
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	400,558

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	15,090,117
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	5,593		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	5,593
3	Subtract line **2e** from line **1**			3	15,084,524
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	1,525		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	1,525
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	15,086,049

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

1	Total expenses and losses per audited financial statements			1	13,388,622
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 XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	13,388,622
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	1,525		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	1,525
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	13,390,147

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	UNCERTAINTY IN INCOME TAXES - NYFA HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS PERIODS ENDING JUNE 30, 2010 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		37,456
3a	Sub-total	0	0			37,456
b	Total from continuation sheets to Part I	0	0			0
c	**Totals** (add lines 3a and 3b)	0	0			37,456

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

3 Enter total number of other organizations or entities . . . . ▶

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
GENERAL SUPPORT - ARTIST FUND	EAST ASIA AND THE PACIFIC	11	37,456	CHECK			

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*	☐ Yes	☑ No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 FOR FELLOWSHIPS AND OTHER GRANTS, RECOMMENDATIONS FOR POTENTIAL PANELISTS COME FROM MANY SOURCES INCLUDING THE ARTISTS' ADVISORY COMMITTEE, ART AND CULTURAL ORGANIZATIONS AROUND NEW YORK STATE AND INDIAN NATIONS LOCATED IN NEW YORK, AND SUGGESTIONS FROM PRACTICING ARTISTS ALL POTENTIAL PANELISTS MUST BE PRACTICING ARTISTS IN THE DISCIPLINE THEY REVIEW AND MUST RECEIVE THREE RECOMMENDATIONS FROM THEIR FIELD THE ARTISTS' ADVISORY COMMITTEE THE APPROVES FINAL CHOICES OF THE PANELIST THAT REFLECT CONSIDERATIONS OF THE GENRE, AGE, ETHNICITY, AND GEOGRAPHY WITHIN NEW YORK STATE AND INDIAN NATIONS LOCATED HEREIN APPLICANTS MAY PARTICIPATE IN THIS PROCESS BY SUGGESTING THEMSELVES OR OTHERS AS PANEL CANDIDATES ON THE APPLICATION PANELISTS CHANGE EACH YEAR THOUGH FELLOWSHIPS GRANTS ARE UNRESTRICTED CASH GRANTS WE DO REQUIRE THAT THEY REPORT ON HOW THE FUNDS WERE USED AND TO DESCRIBE THE CREATIVE WORK ACCOMPLISHED

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Total . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

			(a) Event #1 ANNUAL BENEFIT (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	327,021			327,021
	2	Less Contributions	280,821			280,821
	3	Gross income (line 1 minus line 2)	46,200			46,200
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	62,644			62,644
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(62,644)
	11	Net income summary Combine line 3, column (d), and line 10 ▶				-16,444

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

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

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

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

b If "No," explain

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

b If "Yes," explain

Does the organization operate gaming activities with nonmembers? . . . . Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . Yes No

13 Indicate the percentage of gaming activity operated in

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

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . Yes No

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 88

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 0

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
(1) GENERAL SUPPORT - FELLOWSHIPS & OTHERS	96	660,573			
(2) GENERAL SUPPORT - FISCALLY SPONSORED ARTISTS	442	4,606,705			
(3) GENERAL SUPPORT - EMERGENCY RELEIF	380	1,313,850			

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
SCHEDULE I, PART I, LINE 2		FOR NEW YORK THEATER PROGRAM GRANTS A DIVERSE NATIONAL PANEL OF THEATER LEADERS IS CONVENED TO REVIEW ALL APPLICATIONS FOR CONSIDERATION AND DELIBERATE ON THE SUBMITTED REQUESTS THE AMOUNT OF EACH GRANTEE IS DECIDED BY THE MELLON FOUNDATION BASED ON THE PANEL'S RANKINGS THE MELLON FOUNDATION SEND A LIST OF GRANTEES WITH THE AMOUNT OF THE GRANT TO THE NYFA PROJECT MANAGER THE PROJECT MANAGER DRAFTS AWARD LETTERS TO THE THEATERS WHICH ARE REVIEWED BY NYFA'S EXECUTIVE DIRECTOR AND BY MELLON THE PROJECT DIRECTOR SENDS THESE LETTERS, AND THE THEATERS THEN SUBMIT BUDGETS FOR THEIR PLANNED EXPENDITURES THE BUDGETS ARE REVIEWED BY THE PROJECT MANAGER AND THEN SUBMITTED TO MELLON FOR FINAL APPROVAL AFTER THE REVIEW, THE PROJECT MANAGER REQUESTS THE INITIAL AWARD CHECKS FROM THE FINANCE DEPARTMENT AND THE CHECKS ARE THEN SENT TO THE THEATERS ALONG WITH THEIR REPORTING GUIDELINES EACH RECIPIENT IS REQUIRED TO SEND NYFA AN INTERIM REPORT ON HOW THE DOLLARS WERE USED IN THE CASE OF THE GRANTEES WHOSE ACTIVITIES ARE COMPLETE, THEY SUBMIT A FINAL REPORT AT THAT TIME THE PROGRAM OFFICER VERIFIES THAT THE DOLLARS WERE ALLOCATED APPROPRIATELY ACCORDING TO THE APPROVED BUDGETS IF THERE ARE ANY QUESTIONS, THE PROJECT MANAGER DISCUSSES THE MATTER WITH THE RECIPIENT FOR CLARIFICATION AND REQUESTS A CHANGE OF SCOPE LETTER AND A CORRESPONDING NEW BUDGET FOR REVIEW CHANGES OF SCOPE MUST BE APPROVED BY THE EXECUTIVE DIRECTOR WHO RUNS MAJOR CHANGES BY MELLON FOR APPROVAL ONCE THE PROJECT MANAGER, IN CONSULTATION WITH THE DEVELOPMENT DIRECTOR, REVIEWS THE INTERIM/FINAL REPORTS, RECIPIENTS CAN RECEIVE ANY SECOND DISBURSEMENTS THE PROJECT MANAGER CREATES A SUMMARY REPORT FOR ALL THE GRANTEES' MID-TERM REPORTING AND SUBMITS THIS TO MELLON AT THE END OF THE GRANT TERM, ANY GRANTEES WHO FILED AN INTERIM REPORT WILL THEN FILE A FINAL REPORT TO CONCLUDE THEIR AWARD CYCLE, WHEREIN THE PROCESS STATED FOR THE INTERIM REPORT IS REPEATED FOR FELLOWSHIPS AND OTHER GRANTS, RECOMMENDATIONS FOR POTENTIAL PANELISTS COME FROM MANY SOURCES INCLUDING THE ARTISTS' ADVISORY COMMITTEE, ART AND CULTURAL ORGANIZATIONS AROUND NEW YORK STATE AND INDIAN NATIONS LOCATED IN NEW YORK, AND SUGGESTIONS FROM PRACTICING ARTISTS ALL POTENTIAL PANELISTS MUST BE PRACTICING ARTISTS IN THE DISCIPLINE THEY REVIEW AND MUST RECEIVE THREE RECOMMENDATIONS FROM THEIR FIELD THE ARTISTS' ADVISORY COMMITTEE THE APPROVES FINAL CHOICES OF THE PANELIST THAT REFLECT CONSIDERATIONS OF THE GENRE, AGE, ETHNICITY, AND GEOGRAPHY WITHIN NEW YORK STATE AND INDIAN NATIONS LOCATED HEREIN APPLICANTS MAY PARTICIPATE IN THIS PROCESS BY SUGGESTING THEMSELVES OR OTHERS AS PANEL CANDIDATES ON THE APPLICATION PANELISTS CHANGE EACH YEAR THOUGH FELLOWSHIPS GRANTS ARE UNRESTRICTED CASH GRANTS WE DO REQUIRE THAT THEY REPORT ON HOW THE FUNDS WERE USED AND TO DESCRIBE THE CREATIVE WORK ACCOMPLISHED FOR NYFA EMERGENCY RELEIF FUND AS A RESPONSE TO HURRICANE SANDY, NYFA LAUNCHED THE EMERGENCY RELEIF PROGRAM TO ADMINISTER GRANTS TO ARTISTS THAT SUFFERED FINANCIAL LOSS RELATED TO THEIR ART WORKS DUE TO HURRICANE SANDY NYFA ADMINSTERED OVER $1 MILLION IN GRANTS TO OVER 450 ARTISTS

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 23-7129564
Name: NEW YORK FOUNDATION FOR THE ARTS INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
3-LEGGED DOG INC80 GREENWICH STREET NEW YORK, NY 10006	13-4002491	501(C)(3)	183,500				NY THEATER PROGRAM
ARS NOVA THEATER I INC 511 WEST 54TH STREET 2ND FLOOR NEW YORK, NY 10019	80-0339038	501(C)(3)	127,991				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ATLANTIC THEATER COMPANY76 NINTH AVENUE SUITE 537 NEW YORK,NY 10011	13-3218253	501(C)(3)	6,000				NY THEATER PROGRAM
BIG DANCE THEATER INC 303 CLINTON STREET BROOKLYN,NY 11231	52-2143843	501(C)(3)	20,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CIVILIANS INCTHE CIVILLIANS BROOKLYN,NY 11217	11-3621605	501(C)(3)	80,000				NY THEATER PROGRAM
CLUBBED THUMB INC141 EAST 3RD STREET 11H NEWYORK,NY 10009	13-3947679	501(C)(3)	64,500				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ELEVATOR REPAIR SERVICE THEATER INC138 SOUTH OXFORD ST 2D BROOKLYN,NY 11217	13-3787877	501(C)(3)	95,400				NY THEATER PROGRAM
HIP HOP THEATER FESTIVAL INC442-D LORIMER STREET 195 BROOKLYN,NY 11226	42-1642691	501(C)(3)	85,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
HOME FOR CONTEMPORARY THEATRE & ART145 SIXTH AVE NEW YORK, NY 10013	13-3449416	501(C)(3)	142,000				NY THEATER PROGRAM
LARK THEATRE COMPANY INC311 WEST 43RD STREET SUITE 406 NEW YORK, NY 10036	13-3779197	501(C)(3)	124,500				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MA-YI FILIPINO THEATRE ENSEMBLE INCMI-YI THEATER COMPANY NEW YORK, NY 10018	13-3607832	501(C)(3)	150,000				NY THEATER PROGRAM
MINT THEATER COMPANY 311 WEST 43RD 307 NEW YORK, NY 10036	13-3687725	501(C)(3)	100,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NATIONAL ASIAN AMERICAN THEATRE CO INCATTN MIA KATIGBAK NEW YORK, NY 10018	13-3486145	501(C)(3)	20,000				NY THEATER PROGRAM
NATIONAL THEATER OF THE USA100 SUMMIT STREET 3 BROOKLYN, NY 11231	14-1851280	501(C)(3)	10,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NEW GEORGESTHEATER LABRADOR INC NEW YORK,NY 10013	13-3579172	501(C)(3)	67,500				NY THEATER PROGRAM
NEW YORK CITY PLAYERS INC138 SOUTH OXFORD ST 4C BROOKLYN,NY 11217	13-4087832	501(C)(3)	33,400				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
OPEN CHANNELS NY INC DIXON PLACE NEW YORK, NY 10002	13-3486263	501(C)(3)	89,500				NY THEATER PROGRAM
PAGE SEVENTY-THREE PRODUCTIONS INCATTN ASHER RICHELLI BROOKLYN, NY 11217	13-4059276	501(C)(3)	48,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PERFORMANCE SPACE 122 INC67 WEST STREET UNIT 315 BROOKLYN,NY 11222	13-3522283	501(C)(3)	207,341				NY THEATER PROGRAM
PLAY PRODUCTION COMPANY INC321 W 44TH STREET STE 802 NEW YORK,NY 10036	31-1630552	501(C)(3)	166,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PREGONES TOURING PUERTO RICAN THEATRE COLLECTION INC PREGONES THEATER BRONX,NY 10451	13-3266893	501(C)(3)	107,500				NY THEATER PROGRAM
RATTLESTICK PRODUCTIONS INC224 WAVERLY PLACE NEWYORK,NY 10014	11-3105457	501(C)(3)	156,800				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SARATOGA INTERNATIONAL THEATER INSTITUTE INC520 8TH AVENUE 3RD FLOOR SUITE 310 NEW YORK, NY 10018	13-3730731	501(C)(3)	103,000				NY THEATER PROGRAM
SOHO REPERTORY THEATER INC401 BROADWAY STE 300 NEW YORK, NY 100133005	13-2885288	501(C)(3)	150,500				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SPANISH THEATRE REPERTORY CO LTDATTN ROBERT FEDERICO NEW YORK,NY 10016	13-2672755	501(C)(3)	208,500				NY THEATER PROGRAM
TARGET MARGIN THEATER INC138 SOUTH OXFORD STREET 5A BROOKLYN,NY 11217	13-3697027	501(C)(3)	80,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
THE FOUNDRY THEATRE INC140-142 SECOND AVE STE 405 NEW YORK, NY 10003	13-3761711	501(C)(3)	160,000				NY THEATER PROGRAM
THE ST ANN'S WAREHOUSE INCATTN SUSAN SHINE BROOKLYN, NY 11201	11-2665242	501(C)(3)	204,696				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
THE VINEYARD THEATER AND WORKSHOP CENTER INCATTN JENNIFER GARVEY-BLACKWELL NEW YORK, NY 10003	13-2981292	501(C)(3)	206,000				NY THEATER PROGRAM
THE WOOSTER GROUP ATTN CYNTHIA HEDSTROM NEW YORK, NY 10013	23-7022729	501(C)(3)	183,998				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
THE WORKING THEATER COMPANY520 8TH AVENUE SUITE 303 NEW YORK,NY 10018	13-1394732	501(C)(3)	45,000				NY THEATER PROGRAM
THEATER ET AL INCTHE CHOCOLATE FACTORY THEATER LONG ISLAND CITY,NY 11101	13-4038993	501(C)(3)	54,500				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
WOMENS PROJECT & PRODUCTIONS INCATTN JULIE CROSBY NEW YORK,NY 10023	13-3369451	501(C)(3)	126,200				NY THEATER PROGRAM
YOUNG JEAN LEE'S THEATER COMPANY INC 138 SOUTH OXFORD ST SUITE 1D BROOKLYN,NY 11217	20-8603288	501(C)(3)	45,000				NY THEATER PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AN DIE MUSIK20 JAY STREET BROOKLYN,NY 11201	13-3345336	501(C)(3)	19,600				FISCALLY SPONSORED EMERGING ORGANIZATION
AFRICAN FILM FESTIVAL 20 JAY STREET BROOKLYN,NY 11201	13-3718505	501(C)(3)	10,000				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ADARSH ALPHONS PROJECTS20 JAY STREET BROOKLYN,NY 11201	27-3066150	501(C)(3)	47,652				FISCALLY SPONSORED EMERGING ORGANIZATION
ESOPUS MUSICALIA20 JAY STREET BROOKLYN,NY 11201	45-5108067	501(C)(3)	5,644				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DRUMSONGS PRODUCTIONS INC20 JAY STREET BROOKLYN,NY 11201	06-1550859	501(C)(3)	10,580				FISCALLY SPONSORED EMERGING ORGANIZATION
FOREVER & TODAY20 JAY STREET BROOKLYN,NY 11201	80-0382928	501(C)(3)	8,196				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FUTURPOINTE DANCE INC 20 JAY STREET BROOKLYN,NY 11201	45-2620043	501(C)(3)	14,780				FISCALLY SPONSORED EMERGING ORGANIZATION
GETGLOBAL EMPOWERMENT THEATRE 20 JAY STREET BROOKLYN,NY 11201	27-4263636	501(C)(3)	16,714				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CBD MUSIC INC20 JAY STREET BROOKLYN,NY 11201	84-1688812	501(C)(3)	17,000				FISCALLY SPONSORED EMERGING ORGANIZATION
MUSIC AND MENTORING HOUSE20 JAY STREET BROOKLYN,NY 11201	27-3983709	501(C)(3)	41,315				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MUSIC WITH A MISSION20 JAY STREET BROOKLYN,NY 11201	26-0423050	501(C)(3)	20,834				FISCALLY SPONSORED EMERGING ORGANIZATION
NE(X)TWORKS MUSIC INC 20 JAY STREET BROOKLYN,NY 11201	45-5015139	501(C)(3)	7,046				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PARTHENIA20 JAY STREET BROOKLYN,NY 11201	77-0698322	501(C)(3)	14,050				FISCALLY SPONSORED EMERGING ORGANIZATION
SHOWPAPER20 JAY STREET BROOKLYN,NY 11201	26-1810211	501(C)(3)	5,450				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TILT BRASS INC20 JAY STREET BROOKLYN,NY 11201	27-2848571	501(C)(3)	7,695				FISCALLY SPONSORED EMERGING ORGANIZATION
SCULPTURE PUBLICATION PROJECT INC20 JAY STREET BROOKLYN,NY 11201	46-1196120	501(C)(3)	28,174				FISCALLY SPONSORED EMERGING ORGANIZATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNION CITY MUSIC PROJECT20 JAY STREET BROOKLYN,NY 11201	45-3663891	501(C)(3)	36,114				FISCALLY SPONSORED EMERGING ORGANIZATION

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493085008164

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported as deferred in prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1)MICHAEL ROYCE EXECUTIVE DIRECTOR	**(i)**	236,602	30,000	0	9,514	0	276,116	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 7	EACH YEAR THE BOARD, LED BY THE CHAIRPERSON, PUTS TOGETHER AN ANNUAL REVIEW COMMITTEE, COMPRISED OF THE CHAIR, TREASURER AND A BOARD REPRESENTATIVE FROM THE FOUNDATION WORLD THIS GROUP RESEARCHES REPORTS AND SURVEYS ON SALARIES AGAINST CEOS OF NOT FOR PROFITS WITH SIMILAR MISSIONS, BUDGET SIZES, AND GEOGRAPHY, AND CONTRAST THESE SALARIES AGAINST THOSE LISTED ON WEBSITES SUCH AS GUIDESTAR TO DETERMINE AN APPROPRIATE COMPENSATION FOR THE EXECUTIVE DIRECTOR
SUPPLEMENTAL INFORMATION	PART III	SCHEDULE J, PART II, COLUMN (B)(II) EACH YEAR THE EXECUTIVE DIRECTOR MEETS WITH THE 3 MEMBER COMPENSATION COMMITTEE THAT CONSIST OF THE CHAIRMAN, THE TREASURER, AND ANOTHER MEMBER OF THE BOARD EACH MEMBER OF THE COMPENSATION COMMITTEE COMMUNICATES CERTAIN GOALS THAT ARE TO BE ACHIEVED IN THE NEXT FISCAL YEAR WHICH INCLUDE FINANCIAL, PROGRAMMATIC AND MARKETING GOALS IN THE FOLLOWING YEAR, THE COMPENSATION COMMITTEE DETERMINES TO WHAT EXTENT EACH OF THE GOALS WAS MET AND THEN DISCUSSES, WITHOUT THE EXECUTIVE DIRECTOR PRESENT, A BONUS EQUAL TO GOALS ACHIEVED

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
NEW YORK FOUNDATION FOR THE ARTS INC

Employer identification number
23-7129564

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE FORM 990 IS REVIEWED BY NYFA'S AUDIT AND FINANCE COMMITTEES BEFORE BEING FINALIZED
	FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS ALL BOARD MEMBERS ARE REQUIRED TO FILL OUT A CONFLICT OF INTEREST STATE MENT AND DISCLOSE ANY POTENTIAL CONFLICTS IF CONFLICTS EXISTS THEY ARE BROUGHT FORWARD TO THE GOVERNANCE COMMITTEE TO ASSESS HOW TO GO ABOUT RESOLVING THE CONFLICT
	FORM 990, PART VI, SECTION B, LINE 15	EACH YEAR THE BOARD, LEAD BY THE CHAIRPERSON, PUTS TOGETHER AN ANNUAL REVIEW COMMITTEE, CO MPRISED OF THE CHAIR, TREASURER AND A BOARD REPRESENTATIVE FROM THE FOUNDATION WORLD THIS GROUP RESEARCHES REPORTS AND SURVEYS ON SALARIES FOR CEO OF NOT FOR PROFITS WITH SIMILAR MISSION, BUDGET SIZES AND GEOGRAPHY, AND CONTRAST THESE SALARIES AGAINST THOSE LISTED ON W EBSITES SUCH AS GUIDESTAR TO DETERMINE AN APPROPRIATE COMPENSATION FOR THE EXECUTIVE DIREC TOR FOR FY13, IT WAS DISCUSSED JUNE 20, 2012 THESE DISCUSSIONS TAKE PLACE TOWARDS THE EN D OF THE FISCAL YEAR, TO BE IMPLEMENTED IN THE SUBSEQUENT FISCAL YEAR
	FORM 990, PART VI, SECTION C, LINE 19	NYFA POSTS IT MOST RECENT AUDITED FINANCIALS ON ITS WEBSITE FOR PUBLIC VIEW ALL OTHER DOCUMENTS ARE MADE AVAILABLE UPON REQUEST
	FORM 990, PART XII, LINE 2C	PROCESS IS THE SAME AS LAST YEAR
	FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS ALL BOARD MEMBERS ARE REQUIRED TO FILL OUT A CONFLICT OF INTEREST STATE MENT AND DISCLOSE ANY POTENTIAL CONFLICTS THESE FORMS ARE PROVIDED BY AND MUST BE RETURNE D TO THE EXECUTIVE DIRECTOR IF CONFLICTS EXISTS THEY ARE BROUGHT FORWARD TO THE GOVERNANC E COMMITTEE TO ASSESS HOW TO GO ABOUT RESOLVING THE CONFLICT IF FOUND TO BE A CONFLICT TH E BOARD MEMBER OR DIRECTOR WILL BE REQUIRED TO REFRAIN FROM THOSE DISCUSSIONS AND ABSTAIN FROM VOTING