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

THE JOHN F. KENNEDY CENTER FOR THE PERFORMING ARTS (KENNEDY CENTER) SERVES AS BOTH A PRESIDENTIAL MEMORIAL AND THE NATION'S CENTER FOR THE PERFORMING ARTS. THE KENNEDY CENTER (A) DEVELOPS AND PRESENTS A BROAD ARRAY OF PROGRAMS (E.G., THEATER, MUSIC, OPERA, BALLET, DANCE), (B) DEVELOPS EDUCATIONAL AND COMMUNITY ENGAGEMENT ACTIVITIES BOTH IN WASHINGTON, DC AND NATIONALLY, AND (C) DELIVERS ARTS MANAGEMENT EDUCATION AND DEVELOPMENT PROGRAMS LOCALLY, NATIONALLY, AND INTERNATIONALLY.

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

If "Yes," describe these changes on Schedule O

4a	(Code	) (Expenses \$	183,705,894	including grants of \$	1,399,187) (Revenue \$	76,443,082)
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THE JOHN F. KENNEDY CENTER FOR THE PERFORMING ARTS IS THE NATION'S PERFORMING ARTS FACILITY, ANNUALLY HOSTING MORE THAN 2,000 PERFORMANCES AND EVENTS FOR AUDIENCES TOTALING NEARLY TWO MILLION, WITH TELEVISED PRODUCTIONS, EVENTS AND RADIO BROADCASTS REACHING 40 MILLION MORE. THE ORGANIZATION (A) PRODUCES AND PRESENTS MUSIC, DANCE, THEATER, OPERA AND BALLET, (B) SUPPORTS ARTISTS IN THE CREATION OF NEW WORKS, AND (C) SERVES AS THE NATION'S LEADER IN BOTH GENERAL ARTS AND ART MANAGEMENT EDUCATION. ADDITIONALLY, THE ORGANIZATION IS A LIVING MEMORIAL TO THE LATE PRESIDENT JOHN F. KENNEDY AND RECEIVES MORE THAN ONE MILLION VISITORS ANNUALLY FROM EVERY STATE AND FROM COUNTRIES AROUND THE WORLD WHO CAN VIEW INFORMATION ABOUT HIS VISION AND ADVOCACY FOR THE ARTS, HIS LIFE AND HIS PRESIDENCY.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e	Total program service expenses	183,705,894
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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	No
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 Yes	
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 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? 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)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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.	1,071	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.	2,367	
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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		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?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
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	51	
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			
1b	Enter the number of voting members included in line 1a, above, who are independent	51	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	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
7b	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		
8a	The governing body?	8a	Yes
8b	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
10b	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
11b	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
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	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?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	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	Yes
16b	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	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
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 LYNNE H PRATT 2700 F STREET NW WASHINGTON, DC (202) 416-8000

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

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 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

[illegible]

Part VII

(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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								6,026,584		365,555

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 **180**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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
RAND CONSTRUCTION CORPORATION , 1029 NORTH ROYAL STREET SUITE 400 ALEXANDRIA VA 22314	CONSTRUCTION	7,346,752
FORRESTER CONSTRUCTION COMPANY , 12231 PARKLAWN DRIVE ROCKVILLE MD 20852	CONSTRUCTION	4,929,521
SECURIGUARD INC , 6858 OLD DOMINION DRIVE MCLEAN VA 22101	SECURITY SVCS	4,055,135
GRUNLEY CONSTRUCTION COMPANY , 15020 SHADY GROVE ROAD SUITE 500 ROCKVILLE MD 20850	CONSTRUCTION	3,907,202
CRISTOFORO INC , 1 PENN PLAZA 54TH FLOOR NEW YORK NY 10119	NSO CONDUCTING	2,728,671

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 78

Part VIII

Statement of Revenue

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a	87,080	124,706,358		
	b	Membership dues	1b	3,883,487			
	c	Fundraising events	1c	12,301,358			
	d	Related organizations	1d	16,763,163			
	e	Government grants (contributions)	1e	43,545,595			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	48,125,675			
	g	Noncash contributions included in lines 1a-1f \$		3,488,573			
	h	Total. Add lines 1a-1f					
Program Service Revenue			Business Code				
	2a	PROGRAMMING RECEIPTS	711190	69,179,132	69,179,132		
	b	TICKET HANDLING FEES	711190	5,164,221	5,164,221		
	c	THEATER LICENSE FEES	711190	2,174,122	2,174,122		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		76,517,475			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		983,773			983,773
	4	Income from investment of tax-exempt bond proceeds . . .					
	5	Royalties		24,920			24,920
	6a	(i) Real		409,023		56,118	352,905
		(ii) Personal					
		Gross rents					
		878,515					
	b	Less rental expenses					
	469,492						
	c	Rental income or (loss)					
	409,023						
	d	Net rental income or (loss)					
	7a	(i) Securities		1,959,669			1,959,669
		(ii) Other					
		Gross amount from sales of assets other than inventory					
		37,626,566					
	b	Less cost or other basis and sales expenses					
	35,666,897						
	c	Gain or (loss)					
	1,959,669						
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ 12,301,358 of contributions reported on line 1c) See Part IV, line 18		-4,157,900			-4,157,900
	a	696,719					
	b	Less direct expenses					
		4,854,619					
	c	Net income or (loss) from fundraising events . . .					
	9a	Gross income from gaming activities See Part IV, line 19					
	a						
	b	Less direct expenses					
	c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances		-234,197	-74,393	-159,804	
	a	2,242,275					
	b	Less cost of goods sold					
		2,476,472					
	c	Net income or (loss) from sales of inventory . . .					
	Miscellaneous Revenue		Business Code				
	11a	PARKING RECEIPTS	812930	6,368,296			6,368,296
	b	RESTAURANT LICENSE FEE	722210	1,959,468			1,959,468
	c	OTHER EVENT INCOME	900099	1,796,345			1,796,345
	d	All other revenue		1,233,653		1,848	1,231,805
	e	Total. Add lines 11a-11d		11,357,762			
	12	Total revenue. See Instructions		211,566,883	76,443,082	-101,838	10,519,281

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.	167,476	167,476		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	761,744	761,744		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	469,967	469,967		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	4,458,311	2,276,759	1,562,984	618,568
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.	67,073,761	61,089,714	2,841,452	3,142,595
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	6,276,472	5,940,535	187,503	148,434
9	Other employee benefits.	8,045,710	7,271,102	410,114	364,494
10	Payroll taxes.	4,608,761	4,068,701	282,932	257,128
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	310,049	62,016	244,651	3,382
c	Accounting.	242,141		242,141	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.	317,621			317,621
f	Investment management fees.	295,392		295,392	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	38,477,270	37,890,963	189,065	397,242
12	Advertising and promotion.	3,797,219	3,782,094	13,894	1,231
13	Office expenses.	9,618,401	8,060,069	196,112	1,362,220
14	Information technology.	1,042,266	865,615	127,476	49,175
15	Royalties.	2,355,842	2,355,842		
16	Occupancy.	5,072,752	4,748,170	323,459	1,123
17	Travel.	8,914,028	7,839,827	21,814	1,052,387
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	2,234,935	1,273,072	34,557	927,306
20	Interest.	365,294		365,294	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	20,587,893	20,546,785	22,077	19,031
23	Insurance.	368,048	32,569	335,479	
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	ATTRACTION SHARE/SURPLUS	10,748,898	10,748,898		
b	EQUIP/INSTRUMENT RENTALS	3,496,115	2,926,702	411,431	157,982
c	FLOWERS/GIFTS/RECOGNITION	315,557	220,149	2,502	92,906
d	TRAINING/PROF DEVELOPMENT	255,783	199,636	42,957	13,190
e	All other expenses	227,761	107,489	49,843	70,429
25	Total functional expenses. Add lines 1 through 24e.	200,905,467	183,705,894	8,203,129	8,996,444
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)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		3,544,380	1	4,947,341	
	2	Savings and temporary cash investments		14,234,610	2	11,109,461	
	3	Pledges and grants receivable, net		53,701,987	3	60,536,478	
	4	Accounts receivable, net		1,833,150	4	1,999,514	
	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		490,200	8	516,855	
	9	Prepaid expenses and deferred charges		2,485,093	9	2,599,110	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	483,578,822			
	b	Less accumulated depreciation	10b	282,435,486	206,562,680	10c	201,143,336
	11	Investments—publicly traded securities		22,107,589	11	32,422,125	
	12	Investments—other securities See Part IV, line 11		73,412,678	12	74,417,909	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		18,031,448	15	14,562,449	
16	Total assets. Add lines 1 through 15 (must equal line 34)		396,403,815	16	404,254,578		
Liabilities	17	Accounts payable and accrued expenses		15,336,610	17	13,739,982	
	18	Grants payable			18		
	19	Deferred revenue		24,372,606	19	21,416,560	
	20	Tax-exempt bond liabilities		27,385,000	20	26,440,000	
	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		800,000	23	600,000	
	24	Unsecured notes and loans payable to unrelated third parties		7,376,060	24	6,289,038	
	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		24,887,646	25	17,082,888	
	26	Total liabilities. Add lines 17 through 25		100,157,922	26	85,568,468	
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		101,971,225	27	129,982,361	
	28	Temporarily restricted net assets		98,526,107	28	78,097,982	
	29	Permanently restricted net assets		95,748,561	29	110,605,767	
	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		296,245,893	33	318,686,110	
	34	Total liabilities and net assets/fund balances		396,403,815	34	404,254,578	

Additional Data

Software ID:

Software Version:

EIN: 53-0245017

Name: JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS

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

(A) Name and Title	(B) Average hours per week (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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR DAVID M RUBENSTEIN CHAIRMAN	50	X		X				0	0	0
MS ADRIENNE ARSHT TREASURER	50	X		X				0	0	0
MS COLLEEN BELL TRUSTEE	50	X						0	0	0
THE HON DR JAMES H BILLINGTON TRUSTEE	50	X						0	0	0
REPRESENTATIVE JOHN BOEHNER TRUSTEE	50	X						0	0	0
MR DAVID C BOHNETT TRUSTEE	50	X						0	0	0
SENATOR BARBARA BOXER TRUSTEE	50	X						0	0	0
AMBASSADOR NANCY GOODMAN BRINKER TRUSTEE	50	X						0	0	0
THE HONORABLE HILLARY RODHAM CLINTO TRUSTEE	50	X						0	0	0
THE HONORABLE DR G WAYNE CLOUGH TRUSTEE	50	X						0	0	0
SENATOR THAD COCHRAN TRUSTEE	50	X						0	0	0
SENATOR KENT CONRAD TRUSTEE	50	X						0	0	0
MR GORDON J DAVIS TRUSTEE	50	X						0	0	0
REPRESENTATIVE ROSA DELAURO TRUSTEE	50	X						0	0	0
THE HONORABLE ARNE DUNCAN TRUSTEE	50	X						0	0	0
MS JUDITH ANN EISENBERG TRUSTEE	50	X						0	0	0
MR FRED EYCHANER TRUSTEE	50	X						0	0	0
SENATOR DIANNE FEINSTEIN TRUSTEE	50	X						0	0	0
MS GISELLE FERNANDEZ TRUSTEE	50	X						0	0	0
MS NORMA LEE FUNGER TRUSTEE	50 50	X						0	0	0
THE HONORABLE VINCENT C GRAY TRUSTEE	50	X						0	0	0
MR DONALD J HALL JR TRUSTEE	50	X						0	0	0
MS KAYA HENDERSON TRUSTEE	50	X						0	0	0
MS JOAN E HOTCHKIS TRUSTEE	50	X						0	0	0
SENATOR JAMES M INHOFE TRUSTEE	50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR FRANK F ISLAM TRUSTEE	50	X						0	0	0
THE HONORABLE JONATHAN JARVIS TRUSTEE	50	X						0	0	0
AMBASSADOR CAROLINE KENNEDY TRUSTEE	50	X						0	0	0
MS VICTORIA REGGIE KENNEDY TRUSTEE	50	X						0	0	0
THE HONORABLE JOHN F KERRY TRUSTEE	50	X						0	0	0
MR HERBERT V KOHLER JR TRUSTEE	50	X						0	0	0
MR C MICHAEL KOJAIAN TRUSTEE	50	X						0	0	0
MR CARL H LINDNER III TRUSTEE	50	X						0	0	0
MS AMALIA PEREA MAHONEY TRUSTEE	50	X						0	0	0
MS DONNA G MARRIOTT TRUSTEE	50	X						0	0	0
SENATOR MITCH MCCONNELL TRUSTEE	50	X						0	0	0
MR CAPPY R MCGARR TRUSTEE	50	X						0	0	0
REPRESENTATIVE JOHN MICA TRUSTEE	50	X						0	0	0
MS MARILYN CARLSON NELSON TRUSTEE	50	X						0	0	0
MR CHARLES B ORTNER TRUSTEE	50	X						0	0	0
REPRESENTATIVE NANCY PELOSI TRUSTEE	50	X						0	0	0
MR ROBERT FRANK PENCE TRUSTEE	50	X						0	0	0
MS REBECCA POHLAD TRUSTEE	50	X						0	0	0
MR EARL A POWELL III TRUSTEE	50	X						0	0	0
MR WILLIAM C POWERS TRUSTEE	50	X						0	0	0
THE HONORABLE PENNY PRITZKER TRUSTEE	50	X						0	0	0
REPRESENTATIVE NICK J RAHALL II TRUSTEE	50	X						0	0	0
SENATOR HARRY REID TRUSTEE	50	X						0	0	0
MS SHONDA L RHIMES TRUSTEE	50	X						0	0	0
MR DUANE R ROBERTS TRUSTEE	50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MS SHIRLEY RYAN TRUSTEE	50	X						0	0	0
MR LEONARD SANDS TRUSTEE	50	X						0	0	0
THE HONORABLE KATHLEEN SEBELIUS TRUSTEE	50	X						0	0	0
REPRESENTATIVE BILL SHUSTER TRUSTEE	50	X						0	0	0
MS ALEXANDRA C STANTON TRUSTEE	50	X						0	0	0
MR MARC STERN TRUSTEE	50	X						0	0	0
MR WALTER F ULLOA TRUSTEE	50	X						0	0	0
SENATOR DAVID VITTER TRUSTEE	50	X						0	0	0
DR ROMESH WADHWANI TRUSTEE	50	X						0	0	0
SENATOR MARK WARNER TRUSTEE	50	X						0	0	0
MR ANTHONY WELTERS TRUSTEE	50	X						0	0	0
MS ELAINE WYNN TRUSTEE	50	X						0	0	0
MICHAEL M KAISER PRESIDENT	39 94 06			X				1,450,283	0	27,766
MS LYNNE H PRATT CHIEF FINANC	37 58 2 42			X				310,554	0	32,686
MS MARIA KERSTEN GENERAL COUN	39 88 12			X				258,003	0	31,392
MS KATHLEEN C KRUSE ASST SECRET	40 00			X				189,805	0	14,730
MS HELEN LEE HENDERSON SECRETARY	50 50			X				0	0	0
MR MICHAEL F NEIDORFF TREASURER	50			X				0	0	0
MS CLAUDETTE DONLON EXECUTIVE VP	40 00				X			458,299	0	24,285
MS MARIE MATTSON VP DEVELOPME	40 00				X			381,010	0	28,926
MR DAVID KITTO VP MARKETING	40 00				X			299,747	0	28,915
MS RITA SHAPIRO EXEC DIRECT	38 85 1 15				X			262,523	0	19,675
MR MICHAEL L MAEL EXEC DIRECT	38 85 1 15				X			231,263	0	31,431
MR DARRELL AYERS VP EDUCATION	39 94 06				X			202,035	0	20,208
MARTIN J HACKLEMAN NSO MUSICIAN	40 00					X		594,406	0	9,820

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TOSHIKO V KOHNO NSO MUSICIAN	40 00					X		587,667	0	17,957
NURIT BAR-JOSEF NSO CONCERTM	40 00					X		324,837	0	22,265
GEORGE M BERRA VP, PRODUCTI	40 00					X		254,800	0	28,836
ALAN C LEVINE CIO	40 00					X		221,352	0	26,663

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 JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS	Employer identification number 53-0245017
---	--

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 33¹/₃% 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 33¹/₃% 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?

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)
- | | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

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.")	95,303,350	112,160,590	99,454,531	101,457,678	124,706,358	533,082,507
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	95,303,350	112,160,590	99,454,531	101,457,678	124,706,358	533,082,507
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						14,111,192
6 Public support. Subtract line 5 from line 4						518,971,315

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	95,303,350	112,160,590	99,454,531	101,457,678	124,706,358	533,082,507
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,171,484	1,725,095	1,460,900	1,773,904	1,766,676	8,898,059
9 Net income from unrelated business activities, whether or not the business is regularly carried on	63,816	60,424	134,951	44,138		303,329
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	12,678,250	13,756,175	15,170,743	10,741,919	12,052,633	64,399,720
11 Total support (Add lines 7 through 10)						606,683,615
12 Gross receipts from related activities, etc (see instructions)					12	343,331,684
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	85 540 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	83 130 %
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 IIISupport 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
PART II, SECTION A, LINE 1 THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS (KENNEDY CENTER) REDUCED THE AMOUNTS IT REPORTED ON LINE 1 FOR PREVIOUS YEARS BY UNCOLLECTIBLE PLEDGES WRITTEN OFF DURING THE CURRENT TAX YEAR THE KENNEDY CENTER DEDUCTED THE UNCOLLECTIBLE PLEDGES FROM THE SPECIFIC YEAR IN WHICH IT ORIGINALLY COUNTED THE RELATED CONTRIBUTION AS REVENUE PART II, SECTION B, LINE 10 IN ALL YEARS PRESENTED, "OTHER INCOME" INCLUDES (A) INCOME FROM FUNDRAISING EVENTS AND ACTIVITIES NOT INCLUDED IN EITHER LINE 1 OR LINE 8(A) OF FORM 990 PART VIII, (B) INCOME GENERATED FROM DONOR TRIPS, (C) GENERAL INCOME FROM THE OPERATION OF THE PARKING GARAGE, (D) INCOME FROM PATRON LOUNGES, AND (E) GENERAL MISCELLANEOUS INCOME (E G , REFUNDS) THE AMOUNTS REPORTED IN 2010, 2009 AND 2008 ALSO INCLUDE EXPENSE REIMBURSEMENTS FOR STAFF AND OTHER SERVICES PROVIDED TO AN AFFILIATE

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Employer identification number

53-0245017

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
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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

▶\$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part 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	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	101,448,353	96,030,197	98,844,355	92,771,816	
b Contributions	14,331,074	1,243,165	126,579	3,302,004	
c Net investment earnings, gains, and losses	8,602,869	9,654,059	1,780,850	8,540,523	
d Grants or scholarships					
e Other expenditures for facilities and programs	4,913,544	5,173,697	4,380,191	5,445,787	
f Administrative expenses	291,762	305,371	341,396	324,201	
g End of year balance	119,176,990	101,448,353	96,030,197	98,844,355	

2

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

a

Board designated or quasi-endowment

b

Permanent endowment

92

700

%

c

Temporarily restricted endowment

7

300

%

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

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

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

	Yes	No
3a(i)	Yes	
3a(ii)		No
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		350,000		350,000
b Buildings		463,471,889	266,575,184	196,896,705
c Leasehold improvements				
d Equipment		19,592,523	15,695,892	3,896,631
e Other		164,410	164,410	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				201,143,336

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
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	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	
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	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	

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
INTENDED USES FOR ENDOWMENT FUNDS	SCHEDULE D, PAGE 2, PART V, LINE 4	OVER 180 DONORS HAVE CONTRIBUTED TO THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS' (KENNEDY CENTER)ENDOWMENT. THE ENDOWMENT SUPPORTS A VARIETY OF DONOR-RESTRICTED PURPOSES, INCLUDING, BUT NOT LIMITED TO: (A) THE GENERAL MISSION AND OPERATIONS, (B) EDUCATION PROGRAMS, (C) THE PRESENTATION OF CHAMBER MUSIC, (D) THE PRESENTATION OF JAPANESE ARTS AND ARTISTS, (E) THE PRESENTATION OF PROGRAMMING ON THE MILLENNIUM STAGES, (F) THE ARTISTIC DIRECTION AND PERSONNEL OF THE NATIONAL SYMPHONY ORCHESTRA, AND (G) THE WASHINGTON NATIONAL OPERA PROGRAM. THE ENDOWMENT ALSO INCLUDES CHARITABLE GIFT ANNUITY FUNDS THAT WILL ULTIMATELY BE USED LARGELY TO ESTABLISH ADDITIONAL PERSONAL ENDOWMENTS.
LIABILITY UNDER FIN 48 FOOTNOTE	SCHEDULE D, PAGE 3, PART X	THE EFFECTS OF A TAX POSITION CANNOT BE RECOGNIZED IN THE FINANCIAL STATEMENTS UNLESS IT IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED BASED SOLELY ON ITS TECHNICAL MERITS AS OF THE REPORTING DATE. THE MORE-LIKELY-THAN-NOT THRESHOLD REPRESENTS A POSITIVE ASSERTION BY MANAGEMENT THAT THE KENNEDY CENTER IS ENTITLED TO THE ECONOMIC BENEFITS OF A TAX POSITION. IF A TAX POSITION IS NOT CONSIDERED MORE-LIKELY-THAN-NOT TO BE SUSTAINED BASED SOLELY ON ITS TECHNICAL MERITS, NO BENEFITS OF THE POSITION ARE TO BE RECOGNIZED. MOREOVER, THE MORE-LIKELY-THAN-NOT THRESHOLD MUST CONTINUE TO BE MET IN EACH REPORTING PERIOD TO SUPPORT CONTINUED RECOGNITION OF A BENEFIT. AS OF SEPTEMBER 30, 2013, THERE WERE NO UNCERTAIN TAX POSITIONS FOR WHICH A LIABILITY SHOULD BE RECORDED.

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
JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Employer identification number

53-0245017

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
See Add'l Data					
3a Sub-total					30,485,043
b Total from continuation sheets to Part I					335,539
c Totals (add lines 3a and 3b)					30,820,582

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)
See Add'l Data							

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 organization may 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

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).

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 53-0245017
Name: JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
CENTRAL AMERICA AND THE CARIBBEAN					
CENTRAL AMERICA AND THE CARIBBEAN			PROG SERVICE	INT'L FEST PLANNING	934
CENTRAL AMERICA AND THE CARIBBEAN			PROG SERVICE	ARTS MGMT TRAINING	838

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
EAST ASIA AND THE PACIFIC			PROG SERVICE	GRANTS/AWARDS	40,389
EAST ASIA AND THE PACIFIC			PROG SERVICE	TYA TOURING	506
EUROPE			PROG SERVICE	ORCHESTRA TOUR	1,323,919

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
EUROPE			FUNDRAISING		291,653
EUROPE			PROG SERVICE	GRANTS/AWARDS	125,723
EUROPE			PROG SERVICE	INT'L FEST PLANNING	81,393

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
EUROPE			PROG SERVICE	ARTS MGMT TRAINING	31,173
EUROPE			PROG SERVICE	OPERA PROG PLANNING	4,041
EUROPE			PROG SERVICE	BALLET PROG PLANG	615

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
EUROPE			PROG SERVICE	SEMINAR/CONF	149
MIDDLE EAST AND NORTH AFRICA			PROG SERVICE	ORCHESTRA TOUR	350,291
MIDDLE EAST AND NORTH AFRICA			PROG SERVICE	BALLET TOUR	82,732

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
MIDDLE EAST AND NORTH AFRICA			PROG SERVICE	ARTS MGMT TRAINING	58,201
MIDDLE EAST AND NORTH AFRICA			PROG SERVICE	GRANTS/AWARDS	25,142
MIDDLE EAST AND NORTH AFRICA			FUNDRAISING		15,547

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
NORTH AMERICA			PROG SERVICE	GRANT/AWARDS	44,607
NORTH AMERICA			PROG SERVICE	OPERA PROG PLANNING	3,309
NORTH AMERICA			PROG SERVICE	PAFE PROG PLANNING	467

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
NORTH AMERICA			PROG SERVICE	TYA TOURING	447
NORTH AMERICA			PROG SERVICE	INT'L FEST PLANNING	406
NORTH AMERICA			PROG SERVICE	SEMINAR/CONF	377

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
NORTH AMERICA			PROG SERVICE	BALLET PROG PLANG	181
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROG SERVICE	GRANTS/AWARDS	88,971
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROG SERVICE	INT'L FEST PLANNING	2,910

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROG SERVICE	ARTS MGMT TRAINING	342
SOUTH AMERICA			PROG SERVICE	GRANTS/AWARDS	75,549
SOUTH AMERICA			PROG SERVICE	INT'L FEST PLANNING	32,627

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
SOUTH ASIA			PROG SERVICE	GRANTS/AWARDS	38,720
SUB-SAHARAN AFRICA			PROG SERVICE	GRANTS/AWARDS	30,866
SUB-SAHARAN AFRICA			PROG SERVICE	INT'L FEST PLANNING	213

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(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)
DVIAM INT'L FELLOWSHIPS	EUROPE	13	92,335	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	SOUTH AMERICA	4	66,307	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	RUSSIA AND THE NEWLY INDEPENDENT STATES	2	51,300	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	SOUTH ASIA	4	35,872	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	RUSSIA AND THE NEWLY INDEPENDENT STATES	4	33,869	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	SUB-SAHARAN AFRICA	5	30,866	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	NORTH AMERICA	1	27,921	CHECK/WIRE			
DVIAM FELLOWSHIPS	EUROPE	1	26,100	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	EAST ASIA AND THE PACIFIC	2	19,338	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	MIDDLE EAST AND NORTH AFRICA	2	16,798	CHECK/WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(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)
DOMINGO-CAFRITZ YA PROG	EAST ASIA AND THE PACIFIC	3	13,259	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	SOUTH AMERICA	1	9,242	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	NORTH AMERICA	1	7,659	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	NORTH AMERICA	2	7,347	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	EUROPE	2	7,288	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	MIDDLE EAST AND NORTH AFRICA	2	6,844	CHECK/WIRE			
SUMMER MUSIC INSTITUTE	EAST ASIA AND THE PACIFIC	2	3,990	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	EAST ASIA AND THE PACIFIC	1	3,802	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	RUSSIA AND THE NEWLY INDEPENDENT STATES	1	3,802	CHECK/WIRE			
VSA YOUNG SOLOISTS	SOUTH ASIA	1	2,848	CHECK/WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(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)
SUMMER MUSIC INSTITUTE	NORTH AMERICA	1	1,680	CHECK/WIRE			
KC ACTF AWRDS/SCHOLAR	MIDDLE EAST AND NORTH AFRICA	1	1,500	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	EUROPE	13	92,335	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	SOUTH AMERICA	4	66,307	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	RUSSIA AND THE NEWLY INDEPENDENT STATES	2	51,300	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	SOUTH ASIA	4	35,872	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	RUSSIA AND THE NEWLY INDEPENDENT STATES	4	33,869	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	SUB-SAHARAN AFRICA	5	30,866	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	NORTH AMERICA	1	27,921	CHECK/WIRE			
DVIAM FELLOWSHIPS	EUROPE	1	26,100	CHECK/WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(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)
DVIAM INT'L FELLOWSHIPS	EAST ASIA AND THE PACIFIC	2	19,338	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	MIDDLE EAST AND NORTH AFRICA	2	16,798	CHECK/WIRE			
DOMINGO-CAFRITZ YA PROG	EAST ASIA AND THE PACIFIC	3	13,259	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	SOUTH AMERICA	1	9,242	CHECK/WIRE			
DVIAM INT'L FELLOWSHIPS	NORTH AMERICA	1	7,659	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	NORTH AMERICA	2	7,347	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	EUROPE	2	7,288	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	MIDDLE EAST AND NORTH AFRICA	2	6,844	CHECK/WIRE			
SUMMER MUSIC INSTITUTE	EAST ASIA AND THE PACIFIC	2	3,990	CHECK/WIRE			
BETTY CARTER JAZZ AHEAD	EAST ASIA AND THE PACIFIC	1	3,802	CHECK/WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(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)
BETTY CARTER JAZZ AHEAD	RUSSIA AND THE NEWLY INDEPENDENT STATES	1	3,802	CHECK/WIRE			
VSA YOUNG SOLOISTS	SOUTH ASIA	1	2,848	CHECK/WIRE			
SUMMER MUSIC INSTITUTE	NORTH AMERICA	1	1,680	CHECK/WIRE			
KC ACTF AWRDS/SCHOLAR	MIDDLE EAST AND NORTH AFRICA	1	1,500	CHECK/WIRE			

Form 990 Schedule F - Supplemental Information

Identifier	ReturnReference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE UNITED STATES	SCHEDULE F, PAGE 1, PART I, LINE 2	THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS (KENNEDY CENTER) MONITORS FOREIGN GRANT PROGRAMS PRIMARILY THROUGH DIRECT SUPERVISION OF PROGRAM PARTICIPANTS (E G , FELLOWSHIPS) CERTAIN FOREIGN GRANTS REPRESENT AWARDS TO WINNERS OF ARTISTIC COMPETITIONS IN THESE IN STANCES, THE KENNEDY CENTER AWARDS GRANTS TO THE RECIPIENTS BASED UPON A COMPLETED ARTISTI C DELIVERABLE THAT WAS EVALUATED BY A PANEL

Form 990 Schedule F - Supplemental Information

Identifier	ReturnReference	Explanation
ACTIVITIES PER REGION	SCHEDULE F, PAGE 1, PART I, LINE 3	CENTRAL AMERICA AND THE CARIBBEAN 0 28,067,344 CENTRAL AMERICA AND THE CARIBBEAN 934 0 CEN TRAL AMERICA AND THE CARIBBEAN 838 0 EAST ASIA AND THE PACIFIC 40,389 0 EAST ASIA AND THE PACIFIC 506 0 EUROPE 1,323,919 0 EUROPE 291,653 0 EUROPE 125,723 0 EUROPE 81,393 0 EUROPE 31,173 0 EUROPE 4,041 0 EUROPE 615 0 EUROPE 149 0 MIDDLE EAST AND NORTH AFRICA 350,291 0 MIDDLE EAST AND NORTH AFRICA 82,732 0 MIDDLE EAST AND NORTH AFRICA 58,201 0 MIDDLE EAST AND NORTH AFRICA 25,142 0 MIDDLE EAST AND NORTH AFRICA 15,547 0 NORTH AMERICA 44,607 0 NORTH AMERICA 3,309 0 NORTH AMERICA 467 0 NORTH AMERICA 447 0 NORTH AMERICA 406 0 NORTH AMERICA 377 0 NORTH AMERICA 181 0 RUSSIA AND THE NEWLY INDEPENDENT STATES 88,971 0 RUSSIA AND THE NEWLY INDEPENDENT STATES 2,910 0 RUSSIA AND THE NEWLY INDEPENDENT STATES 342 0 SOUTH AMERI CA 75,549 0 SOUTH AMERICA 32,627 0 SOUTH ASIA 38,720 0 SUB-SAHARAN AFRICA 30,866 0 SUB-SAH ARAN AFRICA 213 0

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
JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Employer identification number
53-0245017

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

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☐

In-person solicitations

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?		(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
		Yes	No			
AVALON CONSULTING GROUP INC 2030 M STREET NW WASHINGTON, DC 20036	ADVISING		No		182,796	-182,796
THE HERITAGE COMPANY PO BOX 16325 LITTLE ROCK, AR 72231	TELEFUNDR		No	157,908	78,216	79,692
SHARE GROUP INC PO BOX 55183 BOSTON, MA 02205	TELEFUNDR		No	56,266	56,609	-343
Total ▶				214,174	317,621	-103,447

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.

All States

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.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))	
			<u>KC HONORS</u> (event type)	<u>SPRING GALA</u> (event type)	<u>7</u> (total number)		
	1	Gross receipts	6,543,664	2,072,092	4,382,321	12,998,077	
	2	Less Contributions . . .	6,269,974	1,993,642	4,037,742	12,301,358	
	3	Gross income (line 1 minus line 2)	273,690	78,450	344,579	696,719	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes . . .					
	6	Rent/facility costs . . .	386,390	88,376	969,642	1,444,408	
	7	Food and beverages .	423,215	227,441	1,000,743	1,651,399	
	8	Entertainment	25,483	1,100	31,327	57,910	
	9	Other direct expenses .	593,102	287,534	820,266	1,700,902	
	10	Direct expense summary Add lines 4 through 9 in column (d) ►					(4,854,619)
	11	Net income summary Combine line 3, column (d), and line 10 ►					-4,157,900

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
Direct Expenses	6	Volunteer labor			
	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
FUNDRAISING VS REIMBURSEMENT EXPLANATION	SCHEDULE G PAGE 1 PART I LINE 2B COLUMN V	AVALON CONSULTING GROUP INC REIMBURSEMENT FOR TRAVEL EXPENSE TOTALED 17 FOR THE TAX YEAR
		PART I LINE 3 AS A TRUST INSTRUMENTALITY OF THE US GOVERNMENT AND PURSUANT TO THE SUPREMACY CLAUSE OF THE US CONSTITUTION THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS IS NOT SUBJECT TO EITHER STATE OR DISTRICT OF COLUMBIA REGULATION OF THE ORGANIZATIONS FUNDRAISING ACTIVITIES ACCORDINGLY THE ORGANIZATION MAY PERFORM FUNDRAISING ACTIVITIES IN ANY STATE AND THE DISTRICT OF COLUMBIA

Schedule G (Form 990 or 990-EZ) 2012

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

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

Employer identification number

53-0245017

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
(1) ACTF MANAGEMENT LTD 115 SCOTT ST SAN MARCOS,TX 78666	05-0546026	501C3	43,250		FMV		ARTS EDUCATION
(2) VSA ARTS OF INDIANA 1505 N DELAWARE ST INDIANAPOLIS,IN 46202	35-1529183	501C3	5,530		FMV		ARTS EDUCATION
(3) VSA ARTS OF MASSACHUSETTS 89 SOUTH ST STE 101 BOSTON,MA 02111	04-2699540	501C3	7,475		FMV		ARTS EDUCATION
(4) VSA ARTS OF MICHIGAN 1920 25TH ST STE B DETROIT,MI 48216	38-2690117	501C3	8,650		FMV		ARTS EDUCATION
(5) VSA ARTS OF RHODE ISLAND 500 PROSPECT ST PAWTUCKET,RI 02860	22-2869993	501C3	8,136		FMV		ARTS EDUCATION
(6) VSA ARTS OF SOUTH CAROLINA SC ARTS COMMISSION 1026 SUMTER ST COLUMBIA,SC 29201	57-0838101	501C3	5,780		FMV		ARTS EDUCATION
(7) VSA ARTS OF TEXAS 3710 CEDAR ST 7 AUSTIN,TX 78705	74-2863338	501C3	5,530		FMV		ARTS EDUCATION
(8)			83,125				

2

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

7

3

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

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
See Additional Data Table					

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
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS (KENNEDY CENTER) MONITORS GRANT PROGRAMS PRIMARILY THROUGH (A) GRANT AGREEMENTS, (B) DIRECT SUPERVISION OF PROGRAM PARTICIPANTS (E G , FELLOWSHIPS), (C) PERIODIC TELEPHONIC/E-MAIL CONTACT WITH THE GRANTEE REGARDING THE PROGRESS OF THE PROGRAM, AND (D) REVIEW OF DELIVERABLES PROVIDED BY THE GRANTEES (E G , FINANCIAL STATEMENTS, PROGRAM REPORTS) CERTAIN KENNEDY CENTER GRANTS REPRESENT AWARDS TO WINNER OF ARTISTIC COMPETITIONS BASED UPON A COMPLETED ARTISTIC DELIVERABLE THAT HAS BEEN EVALUATED BY A PANEL

Software ID:

Software Version:

EIN: 53-0245017

Name: JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS

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
ACTF MANAGEMENT LTD 115 SCOTT ST SAN MARCOS,TX 78666	05-0546026	501C3	43,250		FMV		ARTS EDUCATION
VSA ARTS OF INDIANA 1505 N DELAWARE ST INDIANAPOLIS,IN 46202	35-1529183	501C3	5,530		FMV		ARTS EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VSA ARTS OF MASSACHUSETTS89 SOUTH ST STE 101 BOSTON,MA 02111	04-2699540	501C3	7,475		FMV		ARTS EDUCATION
VSA ARTS OF MICHIGAN 1920 25TH ST STE B DETROIT,MI 48216	38-2690117	501C3	8,650		FMV		ARTS EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VSA ARTS OF RHODE ISLAND500 PROSPECT ST PAWTUCKET,RI 02860	22-2869993	501C3	8,136		FMV		ARTS EDUCATION
VSA ARTS OF SOUTH CAROLINASC ARTS COMMISSION 1026 SUMTER ST COLUMBIA,SC 29201	57-0838101	501C3	5,780		FMV		ARTS EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VSA ARTS OF TEXAS3710 CEDAR ST 7 AUSTIN,TX 78705	74-2863338	501C3	5,530		FMV		ARTS EDUCATION
			83,125				

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
DVIAM FELLOWSHIPS	9	161,566			
KC ACTF AWARDS/SCHOLAR	80	114,315			
DOMINGO-CAFRITZ YA PRG	8	105,496			
SUMMER MUSIC INSTITUTE	56	101,865			
YOUTH FELLOWSHIP PROGRAM	26	84,202			
VW INFINITE EARTH PRG	15	73,427			
SONDHEIM INSP TCHR AWRDS	6	60,000			
BETTY CARTER JAZZ AHEAD	16	31,234			
VSA YOUNG SOLOISTS	3	10,461			
VSA PLAYWRIGHT DISCOVERY	7	9,804			
EXPLR BALLET W/S FARRELL	8	7,727			
WNO OPERA INSTITUTE	1	1,647			

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 JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS	Employer identification number 53-0245017
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Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☒ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
1b	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	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the 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	Yes	
	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
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
	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		No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in 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				
See Additional Data Table								

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
SEVERANCE, NONQUALIFIED, AND EQUITY-BASED PAYMENTS	SCHEDULE J, PAGE 1, PART I, LINE 4	MARTIN J HACKLEMAN 470,000 0 0 TOSHIKO V KOHNO 470,000 0 0

Software ID:

Software Version:

EIN: 53-0245017

Name: JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
MICHAEL M KAISER	(i) (ii)	1,445,707		4,576	17,500	10,266	1,478,049	
MS LYNNE H PRATT	(i) (ii)	309,780		774	17,500	15,186	343,240	
MS MARIA KERSTEN	(i) (ii)	256,833		1,170	17,500	13,892	289,395	
MS KATHLEEN C KRUSE	(i) (ii)	188,685		1,120	13,423	1,307	204,535	
MS CLAUDETTE DONLON	(i) (ii)	457,001		1,298	17,500	6,785	482,584	
MS MARIE MATTSON	(i) (ii)	379,673		1,337	17,500	11,426	409,936	
MR DAVID KITTO	(i) (ii)	294,553		5,194	17,500	11,415	328,662	
MS RITA SHAPIRO	(i) (ii)	261,414		1,109	17,500	2,175	282,198	
MR MICHAEL L MAEL	(i) (ii)	230,270		993	16,379	15,052	262,694	
MR DARRELL AYERS	(i) (ii)	201,251		784	14,135	6,073	222,243	
MARTIN J HACKLEMAN	(i) (ii)	594,273		133	9,465	355	604,226	
TOSHIKO V KOHNO	(i) (ii)	587,578		89	9,745	8,212	605,624	
NURIT BAR-JOSEF	(i) (ii)	324,538		299	12,182	10,083	347,102	
GEORGE M BERRA	(i) (ii)	251,618		3,182	17,500	11,336	283,636	
ALAN C LEVINE	(i) (ii)	217,112		4,240	15,399	11,264	248,015	

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number
53-0245017

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A DISTRICT OF COLUMBIA	53-6001131	2548394G5	07-31-2008	30,700,000	PARKING GARAGE EXPANSION		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	30,700,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds	30,700,000							
12	Other unspent proceeds								
13	Year of substantial completion	2004							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?					X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?					X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	%		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	%		%		%		%	
6	Total of lines 4 and 5	%		%		%		%	
7	Does the bond issue meet the private security or payment test?	X							
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X						
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?		X						
c	No rebate due?	X							
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?	X							

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X							

Part VI

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

Identifier	Return Reference	Explanation
See Additional Data Table		

Software ID:

Software Version:

EIN: 53-0245017

Name: JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Form 990 Schedule K, Part VI - Supplemental Information

Identifier	Return Reference	Explanation
DATE REBATE COMPUTATION PERFORMED	SCHEDULE K	DISTRICT OF COLUMBIA 063013

Form 990 Schedule K, Part VI - Supplemental Information

Identifier	Return Reference	Explanation
ADDITIONAL INFORMATION	SCHEDULE K	DISTRICT OF COLUMBIA PART IV LINE 2 C NO ARBITRAGE CALCULATION WAS PERFORMED AS THE BOND P ROCEEDS WERE ISSUED AS A PART OF A CURRENT REFUNDING ISSUE THEREFORE PROCEEDS WERE USED IM MEDIATELY AND NOT INVESTED

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS

Employer identification number
53-0245017

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		262	COST/SELLING PRICE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	90	3,234,606	COST/SELLING PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	6	91,642	COST/SELLING PRICE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (PRINTED MAT)	X	3	44,063	COST/SELLING PRICE
26 Other ► (WATCHES)	X	2	9,900	COST/SELLING PRICE
27 Other ► (COSMETICS/GIFTS)	X	1	103,600	COST/SELLING PRICE
28 Other ► (CRYSTAL/GIFTS)	X	1	4,500	COST/SELLING PRICE

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information.

Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS	SCHEDULE M, PAGE 1, PART I, LINE 32B	THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS UTILIZES AN INVESTMENT BROKERAGE TO LIQUIDATE DONATED SECURITIES
SUPPLEMENTAL INFORMATION	SCHEDULE M, PAGE 2, PART II	SCHEDULE M, PART I, COLUMN (B) THE NUMBER OF CONTRIBUTIONS REPORTED IN PART I, COLUMN (B) OF THIS SCHEDULE REFLECTS THE NUMBER OF CONTRIBUTIONS FOR EACH SPECIFIC TYPES, NOT THE NUMBER OF INDIVIDUAL ITEMS RECEIVED (E G , A CONTRIBUTION OF 500 ITEMS BY A SINGLE DONOR WOULD BE REFLECTED AS 1 CONTRIBUTION IN PART I, COLUMN (B))

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 JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS	Employer identification number 53-0245017
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Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	
RELATED PARTY INFORMATION AMONG OFFICERS	FORM 990, PAGE 6, PART VI, LINE 2	DAVID M RUBENSTEIN (KC) RAYMOND WHITEMAN (NSOA) BUSINESS DAVID M RUBENSTEIN (KC) MARC STERN (KC) BUSINESS DAVID M RUBENSTEIN (KC) ROGER W SANT (NSOA) BUSINESS
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	PRIOR TO PROVIDING THE FORM 990 (RETURN) TO THE MEMBERS OF THE BOARD OF TRUSTEES FOR THEIR REVIEW AND CONSIDERATION, A DETAIL REVIEW WAS PERFORMED BY THE PRESIDENT, CHIEF FINANCIAL OFFICER, CONTROLLER, GENERAL COUNSEL AND VARIOUS OTHER MEMBERS OF SENIOR MANAGEMENT THE RETURN WAS ALSO REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM AFTER THE RETURN WAS FINALIZED , MANAGEMENT PROVIDED IT TO EACH TRUSTEE VIA E-MAIL/WEBSITE PRIOR TO FILING THE RETURN WITH THE INTERNAL REVENUE SERVICE QUESTIONS, IF ANY , WERE DIRECTED TO AND ADDRESSED BY THE CONTROLLER AND COMMUNICATED TO THE AUDIT COMMITTEE RESPONSES TO NOTABLE QUESTIONS WERE PROVIDED TO ALL TRUSTEES FOR THEIR INFORMATION
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE CONFLICT OF INTEREST POLICY (POLICY) APPLIES TO ALL MEMBERS OF THE BOARD OF TRUSTEES (BOARD), KEY AND OTHER EMPLOYEES THAT HAVE AUTHORITY TO SIGN CONTRACTS TOTALING 25,000 OR MORE AND/OR HAVE THE POWER TO INFLUENCE A TRANSACTION BETWEEN THE KENNEDY CENTER AND ANOTHER ORGANIZATION (COLLECTIVELY "COVERED INDIVIDUALS") THE POLICY COVERS TRANSACTIONS BETWEEN THE KENNEDY CENTER AND (A) A COVERED INDIVIDUAL, (B) HIS OR HER FAMILY MEMBERS AND/OR (C) AN AFFILIATED ENTITY TO ASSIST THE KENNEDY CENTER IN IDENTIFYING TRANSACTIONS WHERE THERE MAY BE AN ACTUAL OR PERCEIVED CONFLICT OF INTEREST, EACH COVERED INDIVIDUAL SHALL COMPLETE AND SIGN AN ANNUAL CONFLICT OF INTEREST DECLARATION (DECLARATION) AND SHALL, AS NECESSARY, UPDATE THE DECLARATION TO REFLECT ANY CHANGES DURING THE COURSE OF THE YEAR DECLARATIONS COMPLETED BY THE TRUSTEES ARE REVIEWED BY THE AUDIT COMMITTEE DECLARATIONS COMPLETED BY NON-TRUSTEE COVERED INDIVIDUALS ARE REVIEWED BY THE GENERAL COUNSEL WHEN A TRUSTEE BECOMES AWARE OF A CONFLICT, HE OR SHE HAS THE DUTY TO IMMEDIATELY DISCLOSE THE EXISTENCE AND CIRCUMSTANCES OF THE CONFLICT TO THE BOARD CHAIR (IF A CONFLICT WERE TO INVOLVE THE BOARD CHAIR, THE EXISTENCE AND CIRCUMSTANCE OF THE CONFLICT WOULD BE DISCLOSED TO EITHER THE AUDIT COMMITTEE OR THE GENERAL COUNSEL) WHEN A NON-TRUSTEE COVERED INDIVIDUAL BECOMES AWARE OF A CONFLICT, HE OR SHE HAS THE DUTY TO IMMEDIATELY DISCLOSE THE EXISTENCE AND CIRCUMSTANCES OF THE CONFLICT TO THE GENERAL COUNSEL (IF A CONFLICT WERE TO INVOLVE THE GENERAL COUNSEL, THE EXISTENCE AND CIRCUMSTANCE OF THE CONFLICT WOULD BE DISCLOSED TO THE AUDIT COMMITTEE) THE AFFECTED COVERED INDIVIDUAL MUST (A) REFRAIN FROM USING HIS OR HER PERSONAL INFLUENCE TO ENCOURAGE THE KENNEDY CENTER TO ENTER INTO/NOT ENTER INTO THE TRANSACTION AND (B) PHYSICALLY EXCUSE HIMSELF OR HERSELF FROM PARTICIPATION IN ANY DISCUSSIONS REGARDING THE TRANSACTION, EXCEPT TO RESPOND TO REQUESTS FOR INFORMATION IF A CONFLICT IS EITHER DISCLOSED IN A DECLARATION TO THE BOARD CHAIR, AUDIT COMMITTEE OR GENERAL COUNSEL, IT WILL BE REVIEWED BY EITHER THE AUDIT COMMITTEE OR GENERAL COUNSEL DURING THE AUDIT COMMITTEE'S (OR GENERAL COUNSEL'S) REVIEW, IT WILL CONSIDER WHETHER, ABSENT THE PARTICIPATION OF THE AFFECTED COVERED INDIVIDUAL, ANY PROPOSED CONFLICT IS FAIR AND REASONABLE TO THE KENNEDY CENTER THE AUDIT COMMITTEE (OR GENERAL COUNSEL) WILL MAINTAIN SUCH DOCUMENTATION AS MAY BE NECESSARY AND APPROPRIATE TO DOCUMENT THE REVIEW OF THE CONFLICT AND WILL REPORT TO THE BOARD ON CONFLICTS (WHETHER APPROVED OR NOT) THE AUDIT COMMITTEE MAY SEEK ADVICE FROM THE GENERAL COUNSEL OR FROM OUTSIDE ADVISORS (THE GENERAL COUNSEL MAY ALSO SEEK ADVICE FROM OUTSIDE ADVISORS) SUCH ADVICE WILL GENERALLY BE IN CONNECTION WITH EITHER THE REVIEW OF ANY CONFLICT OR WITH THE ADMINISTRATION OF THE POLICY
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE COMPENSATION OF THE KENNEDY CENTER'S PRESIDENT IS EVALUATED BY THE BOARD'S INDEPENDENT COMPENSATION COMMITTEE THE COMPENSATION COMMITTEE'S CONSIDERATION OF THE PRESIDENT'S COMPENSATION INCLUDED THE REVIEW OF COMPARABILITY DATA AND THE CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	THE COMPENSATION OF THE KENNEDY CENTER'S OFFICERS AND KEY EMPLOYEES IS EVALUATED BY THE BOARD'S INDEPENDENT COMPENSATION COMMITTEE THE COMPENSATION COMMITTEE'S CONSIDERATION OF THE OFFICERS' AND KEY EMPLOYEES' COMPENSATION INCLUDED THE REVIEW OF COMPARABILITY DATA AND THE CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE KENNEDY CENTER MAKES ITS GOVERNING DOCUMENTS, POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST, IN A PORTABLE DOCUMENT FORMAT (I.E., PDF), GENERALLY VIA E-MAIL
OTHER FEES FOR SERVICES	FORM 990, PART IX, LINE 11G	IT/FACILITIES SERVICES 823,108 54,245 46,760 ARTIST/OTHER PROGRAM SERVICES 24,060,228 0 0 OTHER CONTRACTED SERVICES 247,647 44,117 350,282 BUILDING SERVICES 2,140,157 88,503 0 TEMPORARY STAFF SERVICES 1,844 2,200 200 COMPANY FEES 10,617,979 0 0
RECONCILIATION OF CHANGES - OTHER	FORM 990, PART XI, LINE 9	PENSION RELATED CHANGES, EXCLUDING NET PERIODIC COSTS 4,407,994 GAIN ON INTEREST RATE SWAP 1,329,499 OTHER NON OPERATING ITEMS 350,778

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS

Employer identification number
53-0245017

Part I

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) JFK CENTER FOR THE PERFORMING ARTS 1 LINCOLN STREET SSFC 24 BOSTON, MA 021112900 94-6739330	ANNUITIES	MA	343,744	4,040,529	N/A

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) KC ELECTRONIC MEDIA TECHNO INC 2700 F STREET NW WASHINGTON, DC 20566 52-1136673	SPRT JFKC	DC	501C3	11A	N/A		No
(2) KENNEDY CENTER PRODUCTIONS INC 2700 F STREET NW WASHINGTON, DC 20566 22-1962191	SPRT JFKC	DC	501C3	11A	N/A		No
(3) NATIONAL SYMPHONY ORCHESTRA ASSOC 2700 F STREET NW WASHINGTON, DC 20566 53-0208364	SPRT NSO	DC	501C3	7	N/A		No
(4) VSA ARTS INC 2700 F STREET NW WASHINGTON, DC 20566 52-1065313	PRG DISAB	DC	501C3	7	N/A		No
(5) WASHINGTON NATIONAL OPERA 2700 F STREET NW WASHINGTON, DC 20566 53-0237707	SPRT WNO	DC	501C3	7	N/A		No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

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

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

1

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

a

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

b

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

c

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

d

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

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

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

k

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

l

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

m

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

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

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

s

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

Yes

No

1a

No

1b

No

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

No

1r

No

1s

Yes

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

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

[illegible]

Software ID:

Software Version:

EIN: 53-0245017

Name: JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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TY 2012 GeneralDependencySmall

Name: JOHN F KENNEDY CENTER FOR THE
PERFORMING ARTS

EIN: 53-0245017



Business Name or Person Name:

Taxpayer Identification Number:

Form, Line or Instruction

Reference:

Regulations Reference:

Description: GENERAL FOOTNOTE

Attachment Information: FORM 990, PAGE 1, LINE A: THE JOHN F. KENNEDY CENTER FOR THE PERFORMING ARTS (KENNEDY CENTER) KEEPS ITS BOOKS AND COMPUTES ITS INCOME ON THE BASIS OF A 52-53 WEEK TAX YEAR. THE 52-53 WEEK TAX YEAR ALWAYS ENDS ON THE SUNDAY NEAREST TO THE LAST CALENDAR DAY IN SEPTEMBER. THE TAX YEAR REPORTING HEREIN REPRESENTS THE PERIOD FROM OCTOBER 1, 2012, THROUGH SEPTEMBER 29, 2013, A 52 WEEK TAX YEAR. UNDER SECTION 441 OF THE INTERNAL REVENUE SERVICE CODE, THE KENNEDY CENTER MADE AN INITIAL ELECTION TO USE A 52-53 WEEK TAX YEAR IN ITS 2006 FORM 990. HOWEVER, WHEN THE INTERNAL REVENUE SERVICE RESPONDED TO THE KENNEDY CENTER'S REQUEST, IT NOTIFIED THE KENNEDY CENTER THAT IT CANNOT ACCEPT A 52-53 WEEK ELECTION FOR AN EXEMPT ORGANIZATION. ACCORDINGLY, AND TO ENSURE THAT THE INTERNAL REVENUE SERVICE WOULD ACCEPT THE KENNEDY CENTER'S CURRENT RETURN, THE KENNEDY CENTER CHANGED THE DATES OF ITS REPORTED PERIOD FROM THE AFOREMENTIONED DATED TO THE PERIOD OCTOBER 1, 2012, THROUGH SEPTEMBER 30, 2013.