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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014

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

C Name of organization
NEW YORK HALL OF SCIENCE

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
47-01 111TH STREET

City or town, state or province, country, and ZIP or foreign postal code
CORONA, NY 11368

D Employer identification number
11-2104059

E Telephone number
(718) 699-0005

G Gross receipts $ 23,358,205

F Name and address of principal officer
MARGARET HONEY
47-01 111TH STREET
CORONA, NY 11368

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

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

H(c) Group exemption number ▶

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

J Website: ▶ HTTP //WWW NYSCI ORG

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

L Year of formation 1964

M State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT IN FULL

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

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	37
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	37
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	**5**	342
6	Total number of volunteers (estimate if necessary)	**6**	49
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	21,070,595	15,797,962
9	Program service revenue (Part VIII, line 2g)	2,733,280	2,843,183
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	276,447	430,125
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	860,065	958,879
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	24,940,387	20,030,149
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,227,396	1,707,630
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	10,447,889	11,528,879
16a	Professional fundraising fees (Part IX, column (A), line 11e)	96,840	115,436
b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,901,167		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	8,459,017	7,561,587
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	21,231,142	20,913,532
19	Revenue less expenses Subtract line 18 from line 12	3,709,245	-883,383

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	70,933,255	70,733,736
21	Total liabilities (Part X, line 26)	1,595,034	2,004,881
22	Net assets or fund balances Subtract line 21 from line 20	69,338,221	68,728,855

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** | 2015-05-15
Signature of officer | Date

MARGARET HONEY CHIEF EXECUTIVE OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
GARRETT M HIGGINS				P00543209

Firm's name ▶ O'CONNOR DAVIES LLP | Firm's EIN ▶ 27-1728945

Firm's address ▶ 665 FIFTH AVENUE
NEW YORK, NY 10022 | Phone no (212) 286-2600

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission

NYSCI BRINGS THE EXCITEMENT AND UNDERSTANDING OF SCIENCE AND TECHNOLOGY TO CHILDREN, FAMILIES, TEACHERS, AND OTHERS BY GALVANIZING THEIR CURIOSITY AND OFFERING THEM CREATIVE AND PARTICIPATORY WAYS TO LEARN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 6,333,420 including grants of $) (Revenue $ 2,132,521)

EXHIBITIONS IN ITS FIRST 50 YEARS, NYSCI HAS EVOLVED INTO A LEADER IN THE SCIENCE MUSEUM FIELD, HIGHLY REGARDED FOR ITS EXHIBITIONS, PROGRAMS AND EDUCATIONAL PROJECTS THROUGH ITS PLACE, NYSCI OFFERS EXHIBITS AND PROGRAMS THAT USE DESIGN-MAKE-PLAY METHODOLOGIES TO DEEPEN VISITOR ENGAGEMENT AND CREATE BROAD PATHWAYS OF OPPORTUNITY FOR YOUTH TO PURSUE STEM (SCIENCE, TECHNOLOGY ENGINEERING AND MATH) CAREERS AN UNPARALLELED RANGE OF 450 PERMANENT INTERACTIVE EXHIBITS EXPLORE CHEMISTRY, BIOLOGY, ASTRONOMY, PHYSICS, GENETICS, AND MUCH MORE, ALL GEARED FOR CHILDREN AND ADULTS BY COMBINING THESE EXHIBITS WITH THE OUTDOOR SCIENCE PLAYGROUND, ROCKET PARK MINI GOLF, MAKER SPACE, THE BIOCHEMISTRY, ASTRONOMY AND CONNECTIONS DISCOVERY LABS, THE PRESCHOOL PLACE FOR EARLY CHILDHOOD LEARNING, AND NATIONALLY REPLICATED SCIENCE EDUCATION PROGRAMS FOR UNDERSERVED POPULATIONS, NYSCI OFFERS A HIGH-TECH, HANDS-ON EXPERIENCE OF DISCOVERY FOR VISITORS OF ALL AGES DESIGN LAB UNVEILED IN SPRING 2014, THIS 6,300-SQUARE-FOOT PERMANENT EXHIBITION PROVIDES A MULTI-FACETED, HANDS-ON EXPERIENCE WHERE VISITORS OF ALL AGES LEARN THE FUNDAMENTALS OF ENGINEERING THROUGH DESIGN WITHIN EACH AREA - STUDIO, TREEHOUSE, BACKSTAGE AND SANDBOX - STUDENTS, TEACHERS AND FAMILIES ARE INVITED TO ENGAGE IN ACTIVITIES THAT PROVIDE A DEEPER UNDERSTANDING OF THE ENGINEERING AND DESIGN PROCESS IN THE CLASSROOM, DESIGN-BASED LEARNING CAN INVIGORATE FORMAL SCIENCE TEACHING BY MAKING STUDENTS ACTIVE PARTICIPANTS WHO CONDUCT STEM EXPERIMENTS TO SOLVE A PROBLEM CONNECTED WORLDS NYSCI'S NEWEST EXHIBITION INVITES VISITORS TO EXPLORE ISSUES CONNECTED TO ENVIRONMENTAL BALANCE AND THE STABILITY OF ECOSYSTEMS WITHIN THE CONTEXT OF IMAGINATIVE, IMMERSIVE WORLDS THROUGH STATE-OF-THE-ART SENSOR TECHNOLOGIES, VISITORS CAN ENGAGE WITH ANY ONE OF SEVEN ENVIRONMENTS THAT ARE CREATED THROUGH PROJECTIONS AND DYNAMIC, REAL-TIME ANIMATIONS MULTI-MEDIA, DATA-VISUALIZATION TOOLS, INTERACTIVE DIGITAL TECHNOLOGIES, ROLE-PLAYING GAMES, AND "WHAT-IF" SCENARIOS WILL GIVE VISITORS OPPORTUNITIES TO INVESTIGATE HOW HUMAN ACTIVITY IMPACTS THE SUSTAINABILITY OF COMMUNITIES - LOCALLY, NATIONALLY AND GLOBALLY

4b (Code) (Expenses $ 3,794,089 including grants of $) (Revenue $ 340,756)

EDUCATION SCIENCE CAREER LADDER (SCL) A YOUTH DEVELOPMENT AND EMPLOYMENT PROGRAM AIMED AT INCREASING THE PARTICIPATION OF WOMEN AND PEOPLE OF COLOR IN STEM PROFESSIONS, SCL TRAINS HIGH SCHOOL AND COLLEGE STUDENTS AS EXPLAINERS TO LEAD DEMONSTRATIONS, ASSIST AND INSTRUCT MUSEUM VISITORS, AND FACILITATE PUBLIC PROGRAMS THE SCIENCE CAREER LADDER HAS SERVED OVER 3,000 YOUTH SINCE ITS INCEPTION, EMPLOYING THEM AS EXPLAINERS AND PROVIDING THEM WITH MENTORING, APPRENTICESHIPS AND NETWORKING OPPORTUNITIES TO HELP THEM PREPARE FOR CAREERS IN STEM FIELDS ALAN J FRIEDMAN CENTER FOR THE DEVELOPMENT OF YOUNG SCIENTISTS CREATED IN HONOR OF THE MEMORY OF DR ALAN J FRIEDMAN, WHO LED THE INSTITUTION FROM 1984 UNTIL 2006, THE FRIEDMAN CENTER WILL NOT ONLY SUSTAIN THE SCIENCE CAREER LADDER, BUT ALSO ENABLE THE CREATION OF ADDITIONAL PROGRAMS TO CULTIVATE THE INTERESTS AND CAREERS OF YOUNG SCIENTISTS THE FRIEDMAN CENTER INCLUDES EXPANDED INITIATIVES LIKE THE INNOVATION INSTITUTE THAT ENGAGES HIGH SCHOOL STUDENTS IN NEXT-GENERATION ENTREPRENEURIAL ACTIVITIES, STEM CAREER NIGHTS FOR ASPIRING YOUNG SCIENTISTS TO LEARN FROM STEM PROFESSIONALS, EXPLAINER TV, WHICH TEACHES VIDEO PRODUCTION AND PHOTOGRAPHY, AND SCIENCE CAREER LADDER RESIDENCIES FOR GROWTH AND DEVELOPMENT TRAINING IN STEM FIELDS AFTER SCHOOL PROGRAMS THROUGH WORKSHOPS, CLUBS, CAMPS AND OUTREACH ACTIVITIES DESIGNED TO TEACH THE BASIC PRINCIPLES OF CHEMISTRY, PHYSICS, BIOLOGY, ECOLOGY, FORENSICS AND OTHER SCIENTIFIC DISCIPLINES, THESE PROGRAMS PROVIDE ELEMENTARY THROUGH HIGH SCHOOL STUDENTS WITH HANDS-ON LEARNING AND LEADERSHIP EXPERIENCES AFTERSCHOOL CLUBS TAP INTO THE MAKER MOVEMENT AND INCORPORATE MAKER-RELATED ACTIVITIES SPECIFICALLY DESIGNED TO FOSTER INVENTION IN YOUNG "TINKERS" THROUGH EXPERIMENTAL PROBLEM SOLVING, PROJECT DESIGN AND CONSTRUCTION THE AFTERSCHOOL CLUBS AND CAMPS PROGRAMS ENGAGE OVER 450 STUDENTS EVERY YEAR PROFESSIONAL DEVELOPMENT NYSCI OFFERS STEM PROFESSIONAL DEVELOPMENT EACH YEAR TO MORE THAN 4,000 K-12 TEACHERS, EFFECTIVELY REACHING 300,000 STUDENTS ANNUALLY ON-SITE, MOBILE, DIGITAL, AND WEB-BASED TEACHER DEVELOPMENT PROGRAMS OFFER UNIQUE OPPORTUNITIES TO LEARN AND PRACTICE ENGAGING AND EFFECTIVE METHODS FOR TEACHING STEM SUBJECTS NYSCI DELIVERS WEB-ENABLED PROFESSIONAL DEVELOPMENT TRAINING THROUGH ITS INTERACTIVE DISTANCE LEARNING INITIATIVES AND HAS ALSO PARTNERED WITH EDUCATORS TO DEVELOP NEW, DESIGN-BASED LEARNING PRACTICES THAT WILL REVOLUTIONIZE HOW STEM IS TAUGHT VIRTUAL VISITS THIS PROGRAM ENABLES CHRONICALLY ILL MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS TO INTERACT DIRECTLY WITH THE MUSEUM'S EXHIBITIONS, PARTICIPATE IN STATE-MANDATED CHEMISTRY AND BIOLOGY LABS, AND ALLOW CHILDREN IN MULTIPLE HOSPITALS TO CONNECT WITH ONE ANOTHER, SIMULATING THE FEEL OF A LIVE CLASSROOM VIRTUAL VISITS UTILIZES NEW AND INNOVATIVE TECHNOLOGY SUCH AS AN INTERACTIVE VIDEOCONFERENCING PLATFORM AND A REMOTE CONTROLLED VGO ROBOT THAT ALLOWS THIS VULNERABLE POPULATION TO PARTICIPATE IN NYSCI'S PROGRAMS FROM A DISTANCE

4c (Code) (Expenses $ 938,025 including grants of $) (Revenue $ 369,906)

PUBLIC PROGRAMS MAKER SPACE OCCUPYING 1,200 SQUARE FEET, MAKER SPACE IS A LEARNING ENVIRONMENT AT NYSCI WHERE CHILDREN, TEENS, ADULTS AND FAMILIES CAN TINKER, DESIGN AND CREATE TOGETHER FROM WOODWORKING AND PLASTER CASTING TO ELECTRONICS AND 3D PRINTING, NYSCI ENCOURAGES EXPERIMENTATION AND OPEN-ENDED EXPLORATION EVEN CHILDREN AS YOUNG AS 18 MONTHS OLD CAN PARTICIPATE IN DIY WORKSHOPS THROUGH NYSCI'S LITTLE MAKERS PROGRAM MAKER SPACE OFFERS ACTIVITIES DESIGNED TO APPEAL TO A SPAN OF SKILL LEVELS, FOSTERING OPPORTUNITIES FOR COOPERATION, SHARING AND FAMILY CONVERSATION EARLY CHILDHOOD AND FAMILY LEARNING INITIATIVES THE PRIMARY LOCATION FOR WORKSHOPS AND ACTIVITIES IS THE 2,500-SQUARE FOOT EARLY CHILDHOOD LEARNING ENVIRONMENT, PRESCHOOL PLACE, WHICH OFFERS A VARIETY OF IMAGINATIVE LEARNING EXPERIENCES THAT INTRODUCE YOUNG CHILDREN (AGES 6 AND YOUNGER) AND THEIR ACCOMPANYING PARENTS, GRANDPARENTS AND CAREGIVERS, TO THE SCIENCE OF SOUND, COLOR, LIGHT, MEASUREMENT AND SIMPLE MACHINES ADDITIONAL SPACES FOR PRESCHOOL CHILDREN INCLUDE THE PRESCHOOL LAUNCH PAD AND THE PRESCHOOL SCIENCE PLAYGROUND DESIGNED ESPECIALLY FOR CHILDREN SIX AND UNDER AT PRESCHOOL PLACE AND THROUGHOUT THE ENTIRE MUSEUM SPACE, NYSCI'S YOUNGEST VISITORS ARE USING MATERIALS IN UNEXPECTED WAYS AND MAKING OBJECTS THAT GO BEYOND WHAT WOULD BE POSSIBLE WITH MORE TRADITIONAL AND PRESCRIPTIVE SCIENCE ACTIVITIES LITTLE MAKERS AND FAMILY SCIENCE ADVENTURES LITTLE MAKERS PROVIDES PRE-K READINESS THROUGH WORKSHOPS USING HANDS-ON, DESIGN-BASED CHALLENGES AND SCIENCE/TECHNOLOGY EXPERIENCES TO FOSTER THE DEVELOPMENT OF SCIENTIFIC INQUIRY SKILLS INCLUDING OBSERVATION, MEASUREMENT, CLASSIFICATION, EXPERIMENTATION, PREDICTION, AND COMMUNICATION FAMILY SCIENCE ADVENTURES FACILITATES CREATIVE ART PROJECTS AND INNOVATIVE SCIENCE EXPERIMENTS IN A SERIES OF WORKSHOPS THAT ENGAGE YOUNG CHILDREN, PARENTS, AND CAREGIVERS IN HANDS-ON-SCIENCE PROJECTS THAT PROMOTE SCIENTIFIC INQUIRY AND SKILLS WORLD MAKER FAIRE THE 4TH ANNUAL WORLD MAKER FAIRE - A CROSS BETWEEN A COUNTY FAIR AND THE MOST INTERESTING SCIENCE FAIR EVER - BROUGHT TOGETHER 600 MAKERS AND 75,000 VISITORS FOR A WEEKEND OF CREATIVITY, DISCOVERY, INNOVATION AND THE REQUIRED DETERMINATION AND COMPLEXITY OF REALIZING AN IDEA IN THE MARKETPLACE WORLD MAKER FAIRE ATTRACTS FAMILIES, EDUCATORS, ENGINEERS, ARTISTS, TECHNOLOGISTS, ENTHUSIASTIC ENTREPRENEURS, AS WELL AS GLOBAL CORPORATE LEADERS TO CONNECT, TINKER AND MAKE, REINVIGORATING THE SPIRIT OF AMERICAN INVENTION AND ENGAGEMENT IN STEM

(Code) (Expenses $ 4,869,891 including grants of $ 1,707,630) (Revenue $)

SARA LEE SCHUPF FAMILY CENTER FOR PLAY, SCIENCE, AND TECHNOLOGY LEARNING AN APPLIED RESEARCH AND DEVELOPMENT CENTER, SCIPLAY WORKS TO CREATE THE NEXT GENERATION OF INTERACTIVE AND INSTRUCTIONAL TOOLS FOR BRINGING THE DESIGN-MAKE-PLAY PHILOSOPHY TO LEARNERS AROUND THE GLOBE THE RESEARCH TEAM IS DEVELOPING A SUITE OF DIGITAL AND CURRICULAR TOOLS THAT DRAW ON CHILDREN'S PHYSICAL PLAY AS THE BASIS FOR LEARNING PHYSICS CONCEPTS SCIPLAY RESEARCHERS ARE ALSO EXPLORING THE USE OF PLAYFULNESS AS A PEDAGOGICAL APPROACH FOR INTRODUCING SCIENCE IDEAS TO PRESCHOOL CHILDREN THROUGH A NEW SET OF MOBILE APPLICATIONS PARTNERSHIPS NYSCI IS COMMITTED TO PARTNERSHIPS THAT EXTEND ITS IMPACT LOCALLY, NATIONALLY AND INTERNATIONALLY, AND ITS WORK HAS GARNERED SUPPORT FROM LEADING FOUNDATIONS AND COMPANIES THROUGH COLLABORATIONS WITH THE WHITE HOUSE OFFICE OF SCIENCE TECHNOLOGY POLICY AND ORGANIZATIONS LIKE THE NETWORK SCIENCE CENTER AT WEST POINT, NYSCI HAS PRODUCED CONFERENCES ON RELEVANT TOPICS, WHICH INCLUDE LEARNING AND MAKING AND THE SCIENCE OF BIG DATA VIRTUALLY ALL OF NYSCI'S RESEARCH AND EDUCATIONAL PROGRAMS INVOLVE PARTNERS FROM UNIVERSITIES AND OTHER FORMAL AND INFORMAL LEARNING ORGANIZATIONS INTERNATIONAL IMPACT NYSCI HAS CREATED AN INTERNATIONAL FOOTPRINT, DELIVERING PROGRAMS AND PRESENTATIONS AROUND THE WORLD, INCLUDING THE SCIENCE CENTER WORLD SUMMIT IN BELGIUM AND THE BANGKOK SCIENCE FESTIVAL IN THAILAND IN PARTNERSHIP WITH TUFTS UNIVERSITY AND WITH SUPPORT FROM USAID, NYSCI STAFF HAVE CREATED SMART LAB, A PROGRAM THAT PROVIDES PROFESSIONAL DEVELOPMENT TO 500 SECONDARY SCHOOL TEACHERS AND 10,000 STUDENTS IN INDONESIA

4d Other program services (Describe in Schedule O)

(Expenses $ 4,869,891 including grants of $ 1,707,630) (Revenue $)

4e **Total program service expenses** ▶ 15,935,425

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	Yes	
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	Yes	
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		No
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		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (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 or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If so, complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	148		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	342		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	3a			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	14b			

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a**	37		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	37		
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
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	**7b**			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	**8a**		Yes	
b	Each committee with authority to act on behalf of the governing body?	**8b**		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	**9**			No

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

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

Section C. Disclosure

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

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

▶MARGARET HONEY PRESIDENT & CEO 47-01 111TH STREET
CORONA,NY 11368 (718)699-0005

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . ☐

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) 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)** . . . . . ▶								1,746,614	0	382,715

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 ▶ 12

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
LOCAL PROJECTS 318 WEST 39TH STREET STE 908 NEW YORK NY 10018	IT DESIGN & CONSULTANT	876,750
SITU FABRICATION 20 JAY STREET SUITE 218 BROOKLYN NY 11201	EXHIBIT DESIGN & FABRICATION	388,600
SITU STUDIOS 20 JAY STREET SUITE 218 BROOKLYN NY 11201	EXHIBIT DESIGN CONSULTANT	357,590
DESIGN IO LLC 37 DIMICK STREET 3 SOMVERVILLE MA 02143	EXHIBIT DESIGN & FABRICATION	327,200
42ND STREET LESSEE LLC 110 EAST 42ND STREET NEW YORK NY 10017	GALA PLANNING SERVICES	270,528

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 ▶ 11

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b	430,618			
	c	Fundraising events	1c	979,246			
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e	10,515,785			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,872,313			
	g	Noncash contributions included in lines 1a-1f $		7,585,253			
	h	**Total.** Add lines 1a-1f . . . . . ▶			15,797,962		
Program Service Revenue			Business Code				
	2a	ADMISSIONS	713990	2,142,724	2,142,724		
	b	PUBLIC PROGRAMS	611710	369,906	369,906		
	c	EDUCATION/TRAINING	611710	330,553	330,553		
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . . ▶		2,843,183			
	3	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		70,285			70,285
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . . ▶		4,704			4,704
			(i) Real	(ii) Personal			
	6a	Gross rents	528,016				
	b	Less rental expenses	257,341				
	c	Rental income or (loss)	270,675				
	d	Net rental income or (loss) . . . . . ▶			270,675		270,675
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory	3,029,423				
	b	Less cost or other basis and sales expenses	2,669,583				
	c	Gain or (loss)	359,840				
	d	Net gain or (loss) . . . . . ▶			359,840		359,840
	8a	Gross income from fundraising events (not including $ 979,246 of contributions reported on line 1c) See Part IV, line 18 . . a	728,168				
	b	Less direct expenses . . . b	401,132				
	c	Net income or (loss) from fundraising events . . ▶			327,036		327,036
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶					
Other Revenue		Miscellaneous Revenue	Business Code				
	11a	PARKING LOT INCOME	812930	284,363			284,363
	b	RESTAURANT	722210	63,369			63,369
	c	SALES TAX REIMBURSEMENTS	713990	8,101			8,101
	d	All other revenue		631			631
	e	**Total.** Add lines 11a–11d . . . . . ▶		356,464			
	12	**Total revenue.** See Instructions . . . . . ▶		20,030,149	2,843,183	0	1,389,004

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 or note to any line 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	1,175,333	1,175,333		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	389,800	389,800		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	142,497	142,497		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,467,121	1,025,069	184,007	258,045
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	7,424,576	5,101,090	1,016,679	1,306,807
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	476,910	351,247	32,856	92,807
9 Other employee benefits	1,373,866	1,000,653	97,580	275,633
10 Payroll taxes	786,406	579,192	54,178	153,036
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying	230,841	230,841		
e Professional fundraising services See Part IV, line 17	115,436			115,436
f Investment management fees	48,225		48,225	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	986,650	516,603	344,220	125,827
12 Advertising and promotion	130,430	128,089	718	1,623
13 Office expenses	669,642	448,748	83,069	137,825
14 Information technology	389,561	243,798	84,119	61,644
15 Royalties . .				
16 Occupancy				
17 Travel	206,583	150,853	28,230	27,500
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	52,103	26,164	6,373	19,566
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,377,708	3,317,106	29,191	31,411
23 Insurance	235,605	231,542	1,955	2,108
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 OTHER OPERATING EXPENSE	535,027	285,756	13,034	236,237
b EXHIBIT RENTAL & MAINTE	454,671	399,409	9,185	46,077
c NONCAPTIALIZED EQUIP	148,111	118,665	21,712	7,734
d PARTICIPANT COSTS	57,955	57,955		
e All other expenses	38,475	15,015	21,609	1,851
25 **Total functional expenses.** Add lines 1 through 24e	20,913,532	15,935,425	2,076,940	2,901,167
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 or note to any line in this Part X . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		2,413,679	1	411,075
	2	Savings and temporary cash investments		3,270,465	2	3,055,426
	3	Pledges and grants receivable, net		12,316,167	3	7,431,494
	4	Accounts receivable, net		118,448	4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		234,880	9	597,323
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 83,117,574			
	b	Less accumulated depreciation	10b 27,765,367	49,472,519	10c	55,352,207
	11	Investments—publicly traded securities		3,100,886	11	3,886,211
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		6,211	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		70,933,255	16	70,733,736
Liabilities	17	Accounts payable and accrued expenses		1,288,736	17	1,785,080
	18	Grants payable			18	
	19	Deferred revenue		306,298	19	219,801
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		1,595,034	26	2,004,881
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		5,035,060	27	5,435,196
	28	Temporarily restricted net assets		63,907,736	28	62,897,234
	29	Permanently restricted net assets		395,425	29	396,425
		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		69,338,221	33	68,728,855
	34	Total liabilities and net assets/fund balances		70,933,255	34	70,733,736

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,030,149
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,913,532
3	Revenue less expenses Subtract line 2 from line 1	3	-883,383
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	69,338,221
5	Net unrealized gains (losses) on investments	5	274,017
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	68,728,855

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☑

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

Additional Data

Software ID:
Software Version:
EIN: 11-2104059
Name: NEW YORK HALL OF SCIENCE

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			
FRANCISCO D'SOUZA CO-CHAIR	3 00	X		X				0	0	0
MELISSA VAIL CO-CHAIR	8 00	X		X				0	0	0
SIBYL R GOLDEN SECRETARY	1 00	X		X				0	0	0
MARTIN R KUPFERBERG TREASURER	2 00	X		X				0	0	0
ANTHONY K ASNES TRUSTEE UNTIL 6/19/14	1 00	X						0	0	0
BONNIE ROCHE-BRONFMAN TRUSTEE UNTIL 9/18/13	1 00	X						0	0	0
DR GEORGE CAMPBELL JR TRUSTEE	2 00	X						0	0	0
DAVID CHRISTMAN TRUSTEE	2 00	X						0	0	0
ANTHONY CIOFFI TRUSTEE	1 00	X						0	0	0
RAVENEL B CURRY III TRUSTEE	2 00	X						0	0	0
MIKAEL DOLSTEN MD PHD TRUSTEE UNTIL 9/24/13	1 00	X						0	0	0
NICHOLAS M DONOFRIO TRUSTEE	1 00	X						0	0	0
ATUL DUBEY TRUSTEE	2 00	X						0	0	0
SETH H DUBINESQ TRUSTEE	2 00	X						0	0	0
ANNA M EWING TRUSTEE	1 00	X						0	0	0
JOSEPH R FICALORA TRUSTEE	1 00	X						0	0	0
STUART FISCHER TRUSTEE	4 00	X						0	0	0
JEFFREY M FRIEDMAN TRUSTEE	4 00	X						0	0	0
JOHN J GILBERT III TRUSTEE	5 00	X						0	0	0
EDWARD D HOROWITZ TRUSTEE	2 00	X						0	0	0
MARY E KELLY TRUSTEE	1 00	X						0	0	0
JEFFREY R LIBSHUTZ TRUSTEE	1 00	X						0	0	0
YVONNE LIU TRUSTEE	1 00	X						0	0	0
PAUL J MADDON TRUSTEE	1 00	X						0	0	0
PAUL MALCHOW TRUSTEE	1 00	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			
MARY JANE MCCARTNEY TRUSTEE	2 00	X						0	0	0
ANTHONY J MELONE TRUSTEE	1 00	X						0	0	0
JOEL H MOSER ESQ TRUSTEE	2 00	X						0	0	0
SHANKAR NARAYANAN TRUSTEE UNTIL 3/21/14	1 00	X						0	0	0
DAVID NEWMAN TRUSTEE	1 00	X						0	0	0
DEVESH RAJ TRUSTEE	1 00	X						0	0	0
STEPHEN H SANDS TRUSTEE	2 00	X						0	0	0
LINDA S SANFORD TRUSTEE	1 00	X						0	0	0
SARA LEE SCHUPF TRUSTEE	3 00	X						0	0	0
IVAN G SEIDENBERG TRUSTEE	1 00	X						0	0	0
ANIL SHRIVASTAVA TRUSTEE	1 00	X						0	0	0
ALAN SINSHEIMER ESQ TRUSTEE	5 00	X						0	0	0
KARENANN TERRELL TRUSTEE	1 00	X						0	0	0
CLAUDE TRAHAN TRUSTEE UNTIL 11/1/13	1 00	X						0	0	0
MICHELE TROGNI TRUSTEE	1 00	X						0	0	0
KURT D WOETZEL TRUSTEE	2 00	X						0	0	0
BERT WELLS TRUSTEE	1 00	X						0	0	0
MARGARET HONEY PRESIDENT & CEO	35 00			X				293,487	0	138,472
PATRICIA HUIE CHIEF FINANCIAL OFFICER	35 00			X				173,196	0	27,335
ROBERT LOGAN EXECUTIVE VP & COO	35 00			X				170,253	0	21,950
ERIC SIEGEL DIRECTOR & CHIEF CONTENT O	35 00				X			161,028	0	48,529
FRANK DUUS JR VP, INST ADVANCEMT UNTIL 3/28/14	35 00				X			167,368	0	18,402
DANNY WEMPA VP, EXTERNAL AFFAIRS	35 00				X			166,835	0	19,941
STEPHEN UZZO VP, SCIENCE & TECHNOLOGY	35 00					X		117,452	0	36,545
SUHUI WON ASST VP INSTITUTIONAL ADVANCEMENT	35 00					X		129,330	0	18,613

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			
LEE LIVNEY DTR CORPORATE/FDN RELATIONS	35 00					X		116,426	0	23,999
DAVID KANTER DTR SCIPLAY UNTIL 10/7/13	35 00					X		121,985	0	18,218
ELLEN WAHL DTR YOUTH DEVELOPMT & ENTERPRISE	35 00					X		129,254	0	10,711

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

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

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

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

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? **11g(i)**		
(ii) A family member of a person described in (i) above? **11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	16,150,966	17,321,615	14,250,132	20,566,954	15,797,962	84,087,629
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	602,751	642,854	574,974	503,641	593,556	2,917,776
4 **Total.** Add lines 1 through 3	16,753,717	17,964,469	14,825,106	21,070,595	16,391,518	87,005,405
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)						1,137,898
6 **Public support.** Subtract line 5 from line 4						85,867,507

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	16,753,717	17,964,469	14,825,106	21,070,595	16,391,518	87,005,405
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	556,026	537,226	577,228	607,670	603,005	2,881,155
9 Net income from unrelated business activities, whether or not the business is regularly carried on					327,036	327,036
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	197,679	192,688	218,428	204,744	356,464	1,170,003
11 **Total support** (Add lines 7 through 10)						91,383,599

12	Gross receipts from related activities, etc (see instructions)	12	15,033,845

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 2013 (line 6, column (f) divided by line 11, column (f))	14	93 960 %
15	Public support percentage for 2012 Schedule A, Part II, line 14	15	93 550 %

16a **33 1/3% support test—2013.** 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—2012.** 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—2013.** 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—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2013.** 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—2012.** 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.** 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

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME - 2009 AMOUNT $ 37,513 2010 AMOUNT $ 27,350 2011 AMOUNT $ 37,452 2012 AMOUNT $ 22,935 2013 AMOUNT $ 631 PARKING INCOME - 2009 AMOUNT $ 124,005 2010 AMOUNT $ 121,114 2011 AMOUNT $ 131,222 2012 AMOUNT $ 125,890 2013 AMOUNT $ 284,363 RESTAURANT - 2009 AMOUNT $ 36,161 2010 AMOUNT $ 44,224 2011 AMOUNT $ 49,754 2012 AMOUNT $ 55,919 2013 AMOUNT $ 63,369 SALES TAX REIMBURSEMENT - 2013 AMOUNT $ 8,101

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
NEW YORK HALL OF SCIENCE	11-2104059

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ _____

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period — Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		230,841
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		2,081
j	Total Add lines 1c through 1i			232,922
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
PART II-B, LINE 1	NEW YORK HALL OF SCIENCE HAS RETAINED COUNSEL TO MONITOR APPROPRIATIONS ACTIVITY AND CONTACT GOVERNMENT OFFICIALS REGARDING SCIENCE FUNDING AND FUNDING FOR NYSCI WITH RESPECT TO THE UNITED STATES, NEW YORK STATE AND NEW YORK CITY GOVERNMENTS THE VP, EXTERNAL AFFAIRS PARTICIPATES IN REQUESTING PUBLIC SUPPORT, PRIMARILY FROM NEW YORK CITY SOURCES, TO HELP FUND THE EDUCATIONAL AND OPERATIONAL NEEDS OF NYSCI $1,541 OF HIS SALARY AND $540 OF HIS FRINGE BENEFITS HAVE BEEN ALLOCATED TO THE LOBBYING COSTS DISCLOSED ON SCHEDULE C, PART II-B, LINE 1I

Part IV Supplemental Information *(continued)*

Return Reference	Explanation

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

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

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

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

- a ☑ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☑ Loan or exchange programs
- e ☐ Other

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

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

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

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

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

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

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

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

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

		(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	2,357,482	2,038,199	1,734,354	1,663,190	1,744,496
b	Contributions	1,000	363,975	290,818	360	5,089
c	Net investment earnings, gains, and losses	394,436	187,665	79,394	190,818	137,599
d	Grants or scholarships					
e	Other expenditures for facilities and programs	-156,434	-215,614	-53,255	-107,062	-208,492
f	Administrative expenses	-22,630	-16,743	-13,112	-12,952	-15,502
g	End of year balance	2,573,854	2,357,482	2,038,199	1,734,354	1,663,190

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

- a Board designated or quasi-endowment ▶ 75 400 %
- b Permanent endowment ▶ 15 400 %
- c Temporarily restricted endowment ▶ 9 200 %

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

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

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

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		80,513,213	27,097,884	53,415,329
d Equipment		2,531,455	615,897	1,915,558
e Other		72,906	51,586	21,320
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				55,352,207

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

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

Part X **Other Liabilities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	21,634,018
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	274,017		
b	Donated services and use of facilities	2b	719,605		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	658,472		
e	Add lines **2a** through **2d**			2e	1,652,094
3	Subtract line **2e** from line **1**			3	19,981,924
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	48,225		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	48,225
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	20,030,149

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	22,243,384
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	719,605		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	658,472		
e	Add lines **2a** through **2d**			2e	1,378,077
3	Subtract line **2e** from line **1**			3	20,865,307
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	48,225		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	48,225
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	20,913,532

Part XIII Supplemental Information

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

Return Reference	Explanation
PART III, LINE 1A	CONSISTENT WITH THE POLICY OF MANY MUSEUMS, PURCHASES FOR USE AS EXHIBITS AND PROGRAMS ARE NOT CAPITALIZED
PART III, LINE 4	NYSCI HAS APPROXIMATELY 450 INTERACTIVE EXHIBITS THAT EXPLORE CHEMISTRY, BIOLOGY, ASTRONOMY, PHYSICS, GENETICS, AND OTHER STEM (SCIENCE, TECHNOLOGY, ENGINEERING AND MATH) TOPICS, ALL GEARED FOR CHILDREN AND ADULTS THESE EXHIBITS, COMBINED WITH THE OUTDOOR SCIENCE PLAYGROUND, ROCKET PARK MINI GOLF, THE BIOCHEMISTRY, ASTRONOMY AND CONNECTIONS DISCOVERY LABS, THE PRESCHOOL PLACE FOR EARLY CHILDHOOD LEARNING, THE HARCOURT TEACHER LEADERSHIP CENTER FOR ENHANCED TEACHER TRAINING PROGRAMS, AND NATIONALLY REPLICATED SCIENCE EDUCATION PROGRAMS FOR UNDERSERVED POPULATIONS, OFFER A HIGH-TECH HANDS-ON LABORATORY OF DISCOVERY FOR VISITORS OF ALL AGES THE EXHIBITS SERVE A CRITICAL ROLE IN REALIZING NYSCI'S MISSION TO BRING THE EXCITEMENT AND UNDERSTANDING OF SCIENCE AND TECHNOLOGY TO CHILDREN, FAMILIES, TEACHERS AND OTHERS BY OFFERING CREATIVE AND PARTICIPATORY WAYS TO LEARN ABOUT STEM TOPICS
PART V, LINE 4	NYSCI MAINTAINS VARIOUS DONOR RESTRICTED FUNDS WHOSE PURPOSE IS TO PROVIDE LONG-TERM SUPPORT FOR ITS PROGRAMS IN EXHIBITIONS, EDUCATION, PUBLIC PROGAMS AND SPECIAL PROJECTS
PART X, LINE 2	NYSCI RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY WHEN THEY ARE MORE LIKELY THAN NOT OF BEING SUSTAINED MANAGEMENT HAS DETERMINED THAT NYSCI HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE NYSCI IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO FISCAL 2011
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES REPORTED ON PART VIII LINE 6B 257,340 DIRECT EXPENSE FOR FUNDRAISING GALA REPORTED ON PART VIII LINE 8B 401,132
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES REPORTED ON PART VIII LINE 6B 257,340 DIRECT EXPENSE FOR FUNDRAISING GALA REPORTED ON PART VIII LINE 8B 401,132

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

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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.

▶ Information about Schedule F (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

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 its grants and other 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 its grants and other assistance 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
(1) EUROPE	0	0	GRANTS TO RECIPIENTS		112,497
(2) CANADA	0	0	GRANTS TO RECIPIENTS		30,000
(3)					
(4)					
(5)					
3a Sub-total	0	0			142,497
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	0			142,497

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)
(1)		EUROPE	TO DEVELOP AND PRODUCE INTERACTIVES AND MEDIA ELEMENTS FOR THE E-BOOK, "INNOCENCE, GUILT AND SCIENCE" GRANT RECIPIENT HAD TO SUBMIT DESIGN ELEMENTS AND INTERACTIVE SPECIFICATIONS FOR ORGANIZATION'S REVIEW AND COMMENT GRANT RECIPIENT THEN INCORPORATED TEXT, MEDIA AND DOCUMENTATION INTO A FINISHED E-BOOK PRODUCT	112,497	WIRE TRANSFER			
(2)		CANADA	PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH FEDERAL RESEARCH PROJECT FOCUSING ON DEVELOPING RESOURCES AROUND DESIGN-BASED LEARNING	30,000	CHECK			
(3)								
(4)								

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 . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . . ▶ 1

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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*	☐ Yes	☑ No

Part V Supplemental Information

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	EACH PARTY'S PROJECT REPRESENTATIVE MET REGULARLY DURING THE PROPOSAL AND DEVELOPMENT PHASES OF THE PROJECT TO DISCUSS ANY ISSUES THAT AROSE. GRANT RECIPIENT WAS RESPONSIBLE FOR CREATING A PRODUCTION ROADMAP AND DEVELOPING A DETAILED PRODUCTION BUDGET AND SCHEDULE. IN ADDITION, THE AGREEMENT SET FORTH A PROJECT TIMELINE WITH SPECIFIC MILESTONES FOR THE GRANT RECIPIENT. THE AGREEMENT REQUIRES THE GRANT RECIPIENT TO KEEP UP-TO-DATE BOOKS OF ACCOUNT AND RECORDS RELATING TO NET RECEIPTS AND MUST ALLOW AUTHORIZED REPRESENTATIVES OF THE OTHER PARTIES TO EXAMINE THE APPLICABLE BOOKS AND RECORDS UPON REQUEST

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

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

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

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

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	(iii) No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1	INNOVATIVE PHILANTHROPY 5 HANOVER SQ 2103 NEW YORK, NY 10004	EVENT FUNDRAISING AND PLANNING		No	1,707,414	115,436	1,647,362
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total					1,707,414	115,436	1,647,362

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

NY

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

		(a) Event #1 ANNUAL GALA (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	1,707,414			1,707,414
	2 Less Contributions	979,246			979,246
	3 Gross income (line 1 minus line 2)	728,168			728,168
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	270,528			270,528
	8 Entertainment	86,268			86,268
	9 Other direct expenses	44,336			44,336
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(401,132)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				327,036

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

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

11

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. 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).

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990**

▶ **Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

Part I General Information on Grants and Assistance

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

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

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

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

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 14

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

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) PAYMENT TO DESIGN AND CREATE AN EDUCATIONAL, IMMERSIVE INTERACTIVE EXHIBIT "CONNECTED WORLDS"	1	357,800			
(2) PAYMENT FOR WRITING NARRATIVE IN CONNECTION WITH EDUCATIONAL PROJECT TO PRODUCE E-BOOK "INNOCENCE, GUILT AND SCIENCE"	1	32,000			

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE SUBCONTRACTOR IS REQUIRED TO SUBMIT A BUDGET FOR APPROVAL ONCE APPROVED, NYSCI MAINTAINS THE BUDGET IN ITS ACCOUNTING SYSTEM AND MONITORS GRANT EXPENSES AGAINST THIS BUDGET PAYMENT TO THE SUBCONTRACTOR IS USUALLY IN THE FORM OF REIMBURSEMENTS SUBCONTRACTOR IS REQUIRED TO SUBMIT RECEIPTS AND SUPPORTING DOCUMENTATION IN ORDER TO BE REIMBURSED DEPENDING ON THE PROJECT, INTERIM PROGRESS REPORTS MAY BE REQUIRED A FINAL REPORT AND ACCOUNTING STATEMENT IS USUALLY REQUIRED AT THE END OF THE PROJECT AT ITS DISCRETION, NYSCI RESERVES THE RIGHT TO AUDIT THE SUBCONTRACTOR'S FINANCIAL RECORDS

Additional Data

Software ID:
Software Version:
EIN: 11-2104059
Name: NEW YORK HALL OF SCIENCE

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
AMERICAN INSTITUTE FOR RESEARCH IN THE BEHAVIORAL SCIENCES 1000 THOMAS JEFFERSON STREET NW WASHINGTON, DC 200073835	25-0965219	501(C)(3)	31,437				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON INVESTING IN INNOVATION (I3) FUND RECOVERY ACT

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
EXPLORA SCIENCE CTR & CHILDREN'S MUSEUM OF ALBUQUERUE 1701 MOUNTAIN ROAD NW ALBUQUERQUE,NM 87104	85-0442062	501(C)(3)	20,000				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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
CONCORD CONSORTIUM INC 25 LOVE LANE CONCORD,MA 01742	04-3254131	501(C)(3)	65,746				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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
LEARNING GAMES NETWORK 222 THIRD STREET SUITE 0300 CAMBRIDGE,MA 02142	26-2901936	501(C)(3)	47,750				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES, AND PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON INVESTING IN INNOVATION (I3) FUND RECOVERY ACT

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
COSI DBA LIFELONG LEARNING GROUP 333 W BROAD STREET COLUMBUS,OH 43215	31-4383802	501(C)(3)	46,368				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NEW KNOWLEDGE ORGANIZATION LTD 689 FORT WASHINGTON AVE 5E NEW YORK, NY 100403759	45-4393574	501(C)(3)	8,521				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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
OREGON MUSEUM OF SCIENCE & INDUSTRY 1945 SE WATER AVENUE PORTLAND, OR 972143354	93-0402877	501(C)(3)	64,840				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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
LOCAL PROJECTS LLC 315 WEST 39TH STREET STE 908 NEW YORK, NY 10018	20-1408531	N/A	606,000				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCESAND PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON INVESTING IN INNOVATION (I3) FUND RECOVERY ACT

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
MUSEUM OF SCIENCE 1 SCIENCE PARK BOSTON,MA 021141099	04-2103916	501(C)(3)	20,000				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
THE TECH MUSEUM 201 S MARKET STREET SAN JOSE,CA 95113	94-2864660	501(C)(3)	30,000				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCESAND PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON INVESTING IN INNOVATION (I3) FUND RECOVERY ACT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NEW YORK UNIVERSITY 105 EAST 17TH STREET - 4TH FL NEW YORK, NY 100039580	13-5562308	501(C)(3)	118,458				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON COMPUTER AND INFORMATION SCIENCE AND ENGINEERING

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
SCIENCE MUSEUM OF MINNESOTA 120 W KELLOGG BLVD SAINT PAUL,MN 55102	41-0706172	501(C)(3)	20,000				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH RESEARCH PROJECT FOCUSING ON EDUCATION AND HUMAN RESOURCES

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
ROCKMAN ET AL INC 49 GEARY STREET SUITE 530 SAN FRANCISCO,CA 94108	94-3400371	N/A	64,894				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON BASIC AND APPLIED SCIENTIFIC RESEARCH

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
TRUSTEES OF COLUMBIA UNIVERSITY 615 WEST 131ST STREET MC 8741 NEW YORK, NY 100277922	13-5598093	501(C)(3)	28,292				PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH RESEARCH PROJECT FOCUSING ON COMPUTER AND INFORMATION SCIENCE AND ENGINEERING

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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, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**
▶ **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)MARGARET HONEY PRESIDENT & CEO	(i)	280,197	0	13,290	99,600	38,872	431,959	0
	(ii)	0	0	0	0	0	0	0
(2)PATRICIA HUIE CHIEF FINANCIAL OFFICER	(i)	172,844	0	352	14,589	12,746	200,531	0
	(ii)	0	0	0	0	0	0	0
(3)ROBERT LOGAN EXECUTIVE VP & COO	(i)	168,437	0	1,816	13,905	8,045	192,203	0
	(ii)	0	0	0	0	0	0	0
(4)ERIC SIEGEL DIRECTOR & CHIEF CONTENT O	(i)	159,471	0	1,557	14,443	34,086	209,557	0
	(ii)	0	0	0	0	0	0	0
(5)FRANK DUUS JR VP, INST ADVANCEMT UNTIL 3/28/14	(i)	166,437	0	931	13,755	4,647	185,770	0
	(ii)	0	0	0	0	0	0	0
(6)DANNY WEMPA VP, EXTERNAL AFFAIRS	(i)	166,522	0	313	13,985	5,956	186,776	0
	(ii)	0	0	0	0	0	0	0
(7)STEPHEN UZZO VP, SCIENCE & TECHNOLOGY	(i)	116,420	0	1,032	10,250	26,295	153,997	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 4A	THE ORGANIZATION MADE SEVERANCE PAYMENTS TO MR FRANK DUUS, JR , DIRECTOR OF INSTITUTIONAL ADVANCEMENT, DURING THE TAX YEAR ENDING 6/30/14

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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.
▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

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				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	3	366,096	FMV
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (EQUIP/PROP)	X	1	7,130,870	FMV
26 Other ▶ (MARS ROBOT)	X	1	40,839	EXPERT OPINION
27 Other ▶ (OFFICE/IT EQU)	X	2	38,138	FMV
28 Other ▶ (SEWING MACHIN)	X	1	9,310	FMV

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 . . . | 29 |

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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?	30a		No
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?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
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			

Part II **Supplemental Information.** 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.

Return Reference	Explanation
PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN SCHEDULE M, PART I, COLUMN (B)

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

Return Reference	Explanation
FORM 990, PART I, LINE 1	SINCE ITS FOUNDING AT THE 1964-65 NEW YORK WORLD'S FAIR, THE NEW YORK HALL OF SCIENCE (NYSCI) HAS INSPIRED MORE THAN 7 MILLION PEOPLE - CHILDREN, TEACHERS AND FAMILIES -BY OFFERING CREATIVE, PARTICIPATORY WAYS TO LEARN AND ENCOURAGING PEOPLE TO EXPLORE THEIR CURIOSITY AND NURTURE THEIR CREATIVITY LOCATED IN QUEENS, THE MOST ETHNICALLY DIVERSE COUNTY IN THE COUNTRY, NYSCI WELCOMES 500,000 VISITORS EACH YEAR AND SERVES THOUSANDS MORE THROUGH OUTREACH IN SCHOOLS, TEACHER PROFESSIONAL DEVELOPMENT, AND A VARIETY OF EVENTS, PROGRAMS AND RESEARCH INITIATIVES NYSCI ENGAGES PEOPLE OF ALL AGES AND EXPERIENCES, PARTICULARLY YOUNG PEOPLE IN SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) BY FOSTERING THE EXCITEMENT OF SELF-DIRECTED EXPLORATION AND BY TAPPING INTO THE JOY OF LEARNING INTRINSIC IN PLAY NYSCI IS ALSO COMMITTED TO TRAINING AND SUPPORTING K-12 SCIENCE TEACHERS, RECOGNIZING AND RESPECTING THE CRITICAL ROLE EDUCATORS PLAY IN SPARKING AND MAINTAINING STUDENTS' LIFELONG LOVE OF SCIENCE OVER THE PAST SEVERAL YEARS, NYSCI HAS EMBRACED A PHILOSOPHY CALLED DESIGN-MAKE-PLAY DESIGN EMPHASIZES INTENTIONALITY IN PROBLEM SOLVING AND HELPS PEOPLE SEE THE POSSIBILITIES IN THE WORLD, MAKE HIGHLIGHTS HANDS-ON EXPERIENCE WITH MATERIALS, TOOLS AND PROCESSES AND NURTURES THE DEVELOPMENT OF SKILLS AND CONFIDENCE, PLAY PROMOTES INTRINSIC MOTIVATION AND DEEP ENGAGEMENT THESE DESIGN-MAKE-PLAY CHARACTERISTICS ARE CLOSELY ALIGNED WITH CONCEPTS AND PRACTICES UNDERSCORED IN THE COMMON CORE MATH AND NEXT GENERATION SCIENCE STANDARDS, AND ARE DYNAMIC VEHICLES FOR CULTIVATING THE KINDS OF CREATIVE PROBLEM SOLVING THAT EMPLOYERS ARE LOOKING FOR IN THEIR 21ST CENTURY WORKFORCES NYSCI'S VISION IS REALIZED IN THREE INTERCONNECTED WAYS 1) THROUGH THE MUSEUM AS A VITAL PLACE FOR LEARNING, 2) THROUGH PRODUCTS THAT EXTEND LEARNING BEYOND THE WALLS OF THE MUSEUM, AND 3) THROUGH PARTNERSHIPS THAT ENHANCE NYSCI'S IMPACT ON STEM LEARNING AND ENGAGEMENT IN PEOPLE'S DAY-TO-DAY LIVES , IN THE CLASSROOM, IN THE WORKPLACE, AND IN THEIR HOMES

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	BOARD OF TRUSTEE MEMBER ALAN SINSHEIMER AND BOARD OF TRUSTEE MEMBER SETH DUBIN HAVE A FAMILY RELATIONSHIP BOARD OF TRUSTEE MEMBER GEORGE CAMPBELL IS A DIRECTOR AT CON EDISON WHERE BOARD OF TRUSTEE MEMBERS MARY KELLY AND CLAUDE TRAHAN ARE EXECUTIVES BOARD OF TRUSTEE MEMBER GEORGE CAMPBELL AND BOARD OF TRUSTEE MEMBER NICHOLAS DONOFRIO BOTH SERVE AS TRUSTEES ON THE BOARD OF THE MITRE CORPORATION BOARD OF TRUSTEE MEMBER KURT WOETZEL IS A SENIOR EXECUTIVE VP AND CHIEF INFORMATION OFFICER OF BANK OF NY MELLON ON WHOSE BOARD NYSCI BOARD OF TRUSTEE MEMBER NICHOLAS DONOFRIO SERVES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE CHIEF FINANCIAL OFFICER ENGAGED AN EXTERNAL ACCOUNTING FIRM TO PREPARE FORM 990 THE FIRST DRAFT WAS REVIEWED WITH SENIOR MANAGEMENT FORM 990 WAS THEN PROVIDED TO EACH VOTING MEMBER ELECTRONICALLY VIA EMAIL FOR REVIEW AND COMMENT BEFORE FILING THE CHIEF FINANCIAL OFFICER COORDINATED DISTRIBUTION TO THE BOARD, AND IN CONJUNCTION WITH THE CHIEF EXECUTIVE OFFICER, RESPONDED TO COMMENTS AND QUESTIONS FORM 990 WAS FILED AFTER REVIEW AND COMMENT BY THE BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	NYSCI'S TRANSPARENCY POLICY INTRODUCTION THE INTERNAL REVENUE CODE IMPOSES PENALTY TAXES IF NYSCI WERE TO ENTER INTO AN EXCESS BENEFIT TRANSACTION WITH A TRUSTEE OR OFFICER OF NYSCI OR WITH ANYONE ELSE WHO, DURING THE PRIOR FIVE YEARS, HAS BEEN IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF NYSCI A SIMILAR CONCERN ABOUT CONFLICTS OF INTEREST ALSO INFORMS THE NEW YORK NOT-FOR-PROFIT LAW PROVISIONS ABOUT CONTRACTS INVOLVING NOT-FOR-PROFIT ORGANIZATIONS AND THEIR TRUSTEES AND OFFICERS NYSCI HAS ALWAYS BEEN CAREFUL TO AVOID CONFLICTS ISSUES NEVERTHELESS, IT IS APPROPRIATE TO SET OUT NYSCI'S POLICY IN A WRITTEN STATEMENT WHICH DRAWS FROM THE REQUIREMENTS OF FEDERAL AND STATE LAW AND ALSO FROM OTHER PRINCIPLES OF GOOD MANAGEMENT DEFINITIONS A PERSON WHO HAS "SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF NYSCI" MEANS EACH TRUSTEE AND EACH SENIOR OFFICER OF NYSCI INCLUDING ALL NYSCI EMPLOYEES WHO ARE AT THE LEVEL OF DIRECTOR OR ABOVE FOR OUR PURPOSES, IT ALSO MEANS A CORPORATION IN WHICH A TRUSTEE OR A SENIOR OFFICER IS A DIRECTOR OR OFFICER OR CONTROLS AT LEAST 10% OF THE VOTING POWER AND A PARTNERSHIP IN WHICH A TRUSTEE OR A SENIOR OFFICER IS ENTITLED TO AT LEAST 10% OF THE PROFITS WE CALL EACH OF THOSE PEOPLE AND ENTITIES AN "INFLUENTIAL PERSON" THAT ALSO INCLUDES AN INDIVIDUAL'S SPOUSE OR SIGNIFICANT OTHER, PARENTS, CHILDREN AND THEIR SPOUSES, SISTERS AND BROTHERS, AND SISTERS- AND BROTHERS-IN-LAW AN EXCESS BENEFIT TRANSACTION IS A TRANSACTION IN WHICH NYSCI PROVIDES TO AN INFLUENTIAL PERSON AN ECONOMIC BENEFIT THAT IS WORTH MORE THAN THE GOODS OR SERVICES THAT NYSCI RECEIVES IN RETURN THE "REVIEWER" IS THE COMMITTEE DESIGNATED BY THE CHAIRMAN TO REVIEW TRANSACTIONS THAT REQUIRE AUTHORIZATION UNDER THIS POLICY STATEMENT REVIEW WITHOUT FIRST RECEIVING AUTHORIZATION FROM THE REVIEWER A) NYSCI MAY NOT DO BUSINESS WITH AN INFLUENTIAL PERSON, B) NO INFLUENTIAL PERSON MAY ACCEPT A GIFT OR LOAN (OTHER THAN A LOAN IN THE NORMAL COURSE OF THE LENDER'S BUSINESS) FROM A CONTRACTOR OR VENDOR OF NYSCI AND THAT HAS A VALUE OF MORE THAN $100, C) NYSCI MAY NOT MAKE A CONTRIBUTION TO ANY CHARITY OF WHICH AN INFLUENTIAL PERSON IS A DIRECTOR OR OFFICER, AND D) NO INFLUENTIAL PERSON MAY GIVE OR LOAN TO AN EMPLOYEE OF NYSCI, NOR MAY AN EMPLOYEE OF NYSCI GIVE OR LOAN TO AN INFLUENTIAL PERSON, MORE THAN $1,000 THE REVIEWER MAY DECLINE TO GRANT AUTHORIZATION FOR A TRANSACTION UNDER (A) ONLY IF THE REVIEWER DETERMINES THAT THE PROPOSED TRANSACTION WOULD BE AN EXCESS BENEFIT TRANSACTION THE REVIEWER MAY DECLINE TO GRANT AUTHORIZATION FOR A TRANSACTION UNDER (B), (C), OR (D) ONLY IF THE REVIEWER DETERMINES THAT THE PROPOSED TRANSACTION WOULD BE INIMICAL, OR MAY BE SEEN TO BE INIMICAL, TO RESPONSIBLE MANAGEMENT OF NYSCI LARGE CONTRACTS BEFORE NYSCI ENTERS INTO ANY AGREEMENT FOR MORE THAN 2 5% OF NYSCI'S OPERATING BUDGET, IT SHALL NOTIFY THE REVIEWER OF THE NATURE OF THE AGREEMENT AND THE NAME OF THE OTHER PARTY AND FURNISH WHATEVER INFORMATION IT HAS IN ITS POSSESSION ABOUT THE OWNERSHIP AND CONTROL OF THE OTHER PARTY THE REVIEWER SHALL BE DEEMED TO HAVE AUTHORIZED NYSCI TO ENTER INTO THE AGREEMENT UNLESS IT NOTIFIES NYSCI WITHIN SEVEN DAYS THAT THE AGREEMENT CONTEMPLATES A TRANSACTION THAT, BY REASONS OF THE IDENTITY OF THE PARTIES, REQUIRES FURTHER REVIEW UNDER THIS POLICY STATEMENT NOTIFICATION EACH INFLUENTIAL PERSON MUST NOTIFY THE REVIEWER UPON BECOMING AWARE THAT NYSCI IS DOING BUSINESS, OR IS CONSIDERING DOING BUSINESS, WITH THAT INFLUENTIAL PERSON IN ADDITION, ONCE EACH YEAR AT A TIME DESIGNATED BY THE CHAIRMAN, EACH INFLUENTIAL PERSON SHALL SUBMIT TO THE REVIEWER A COMPLETED QUESTIONNAIRE IN THE FORM ATTACHED TO THIS POLICY STATEMENT REPETITIVE BUSINESS IN THE EVENT THAT AN INFLUENTIAL PERSON AND NYSCI EXPECT TO ENGAGE IN REPETITIVE BUSINESS, THE REVIEWER MAY PROSPECTIVELY AUTHORIZE THE CONDUCT OF THAT BUSINESS ON TERMS THAT THE REVIEWER CONSIDERS APPROPRIATE NO FURTHER AUTHORIZATION FOR THAT REPETITIVE BUSINESS SHALL BE REQUIRED SO LONG AS THE INFLUENTIAL PERSON AND NYSCI COMPLY WITH THE TERMS SET BY THE REVIEWER THE REVIEWER MAY REVOKE A PROSPECTIVE AUTHORIZATION AT ANY TIME RECONSIDERATION IF THE REVIEWER DECLINES TO AUTHORIZE ANY TRANSACTION THAT REQUIRES AUTHORIZATION UNDER THIS POLICY STATEMENT, ANY PARTY TO THAT TRANSACTION MAY SUBMIT THE MATTER TO THE BOARD OF TRUSTEES OR THE EXECUTIVE COMMITTEE OF THE BOARD FOR RECONSIDERATION THE RELEVANT INFLUENTIAL PERSON MAY NOT VOTE ON THAT MATTER AS A TRUSTEE OR MEMBER OF THE EXECUTIVE COMMITTEE DOCUMENTATION ANNUALLY, THE FINANCE AND AUDIT COMMITTEE PRESENTS TO THE BOARD ANY SIGNIFICANT POTENTIAL CONFLICTS, OR LACK THEREOF, ENCOUNTERED DURING THE YEAR THE PRESENTATION IS RECORDED IN THE MINUTES OF THE BOARD MEETING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE CEO IS REVIEWED AND APPROVED BY THE BOARD OF TRUSTEES, PROVIDED THAT PERSONS WITH POTENTIAL CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENTS DO NOT PARTICIPATE. THE BOARD USES APPROPRIATE AND ADEQUATE DATA TO DETERMINE THE REASONABLENESS OF THE COMPENSATION BEING CONSIDERED AGAINST INDUSTRY STANDARDS. THE BOARD DISCUSSES THE COMPENSATION PACKAGE IN EXECUTIVE SESSION AT THE APPROPRIATE QUARTERLY BOARD MEETING, FOLLOWED BY A CLOSED DOOR DISCUSSION WITH THE CEO. THE BOARD'S APPROVAL OF CHANGES TO THE CEO'S COMPENSATION, ALONG WITH ANY ASSOCIATED PERFORMANCE GOALS, ARE CAPTURED IN A FORMAL SIGNED AGREEMENT BETWEEN THE BOARD AND THE CEO. FOR KEY EMPLOYEES, THE CEO USES INDUSTRY STANDARDS SUBSTANTIATED BY APPROPRIATE DATA SUCH AS COMPENSATION SURVEYS, PERFORMANCE REVIEWS, AND A CONSIDERATION OF EQUITY AND PARITY WITHIN THE ORGANIZATION. WRITTEN AND SIGNED PERFORMANCE REVIEWS, WHICH INCLUDE FUTURE GOALS, ARE PREPARED AND DISCUSSED BETWEEN EACH KEY EMPLOYEE AND THE CEO. CHANGES TO A KEY EMPLOYEE'S COMPENSATION IS DOCUMENTED IN A WRITTEN MEMO FROM THE CEO TO THE KEY EMPLOYEE. THE COMPENSATION REVIEW PROCESS WAS LAST UNDERTAKEN FOR THE CEO AND KEY EMPLOYEES IN THE YEARS LISTED BELOW. PRESIDENT & CEO 2013 DIRECTOR & CHIEF CONTENT OFFICER 2013 CHIEF FINANCIAL OFFICER 2013 EXECUTIVE VP & COO 2013 VP INSTITUTIONAL ADVANCEMENT 2013 VP EXTERNAL AFFAIRS 2013

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY HAVE NEVER BEEN REQUESTED AND HAVE NOT BEEN MADE READILY AVAILABLE TO THE PUBLIC FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST HARD COPIES ARE PROVIDED WITH A CHARGE TO THE RECIPIENT FOR POSTAGE ELECTRONIC COPIES IN PDF FORMAT ARE PROVIDED FOR FREE

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THERE HAVE BEEN NO CHANGES IN THE OVERSIGHT PROCESS OF THE AUDIT OF NYSCI'S FINANCIAL STATEMENTS OR IN THE SELECTION PROCESS OF AN INDEPENDENT ACCOUNTANT WITHIN THIS TAX YEAR