

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493014006346

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)

ightharpoonup Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	rthe 2	014 ca	lendar year, or tax year beginnir	ng 06-01-2014 , and ending 05-31-20	015			
B Che	eck if ap	plicable	C Name of organization NEW ENGLAND FOUNDATION FOR	THE ARTS INCORPORATED		D Emplo	yer ider	ntification number
Add	lress ch	ange				04-25	93591	1
☐ Nar	ne char	nge	Doing business as					
☐ Init	ıal retur	n				E Telepho	one num	her
Fina	al urn/term	unated	Number and street (or P O box if i 145 TREMONT STREET NO 7TH FL	mail is not delivered to street address) Room,	/suite	· ·		
_						(617)	951-0	010
_	ended r olication	eturn pending	BOSTON, MA 021110010	ıntry, and ZIP or foreign postal code		<b>G</b> Gross r	eceıpts \$	8,159,240
			<b>F</b> Name and address of pri	ncıpal officer	H(a)	Is this a group	return	for
			ANITA CHAN 145 TREMONT STREET NO	2 7 TH EI		subordinates?		┌ Yes <b>┌</b> No
			BOSTON, MA 021110010		н(р)	Are all subordi	nates	┌ Yes ┌ No
						included?	ilates	1 1651 110
I Ta	x-exem	pt status	501(c)(3) 501(c)( )	(insert no ) 4947(a)(1) or 527		If "No," attach	a lıst	(see instructions)
			WW NEFA ORG		H(c)	Group exempt	ion nur	mber ►
			Corporation Trust Associate	on	<b>L</b> Yea	ar of formation 19	76 <b>M</b>	State of legal domicile MA
Pa	rt I	Sum	nmary					
	l N	IEFA'S	MISSION IS TO BUILD CONN	on or most significant activities ECTIONS AMONG ARTISTS, ARTS IES IN NEW ENGLAND, THE NATIO			FUND	ERS, POWERING
)Ce	_							
liai	-							
Governance	2 0	heck t	hıs box ┡─ ıf the organızatıon d	iscontinued its operations or dispose	d of more t	than 25% of its	net as	sets
			, -					
Activities &	l			ning body (Part VI, line 1a)			3	22
Ħe	l			of the governing body (Part VI, line 1			4	22
ÇŢ.	l			calendar year 2014 (Part V, line 2a)			5	24
4	l			necessary)			6	22
				Part VIII, column (C), line 12 from Form 990-T, line 34			7a 7b	0
	, b	rec unit	erated business taxable income		<del></del>	Prior Year	1 /b	Current Year
	8	Contr	ubutions and grants (Part VIII.)	ıne 1h)	_	10,375,	598	6,501,174
횰	9		am service revenue (Part VIII, I		81,		244,862	
Revenue	10		tment income (Part VIII, colum		453,		414,867	
æ	11	Other	revenue (Part VIII, column (A)	, lines 5, 6d, 8c, 9c, 10c, and 11e)			0	0
	12			l (must equal Part VIII, column (A), l	ıne	10,911,		7,160,903
	13					3,399,		3,216,911
	14			IX, column (A), line 4)		3,399,	0	3,210,911
	15		·	ee benefits (Part IX, column (A), line			<del>-  </del>	
\$		5-10		(, ,		1,486,	490	1,652,927
Expenses	16a	Profes	ssional fundraising fees (Part IX	, column (A), line 11e)	·		0	0
ਨੌ	ь	Total fu	undraising expenses (Part IX, column (I	D), line 25) ► 259,663	-			
_	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)		1,348,	010	2,240,874
	18	Total	expenses Add lines 13-17 (mi	ust equal Part IX, column (A), line 25	)	6,234,	254	7,110,712
	19	Rever	nue less expenses Subtract line	18 from line 12		4,676,	964	50,191
Not Assets or Fund Balances					Beg	jinning of Curre Year	nt	End of Year
Sets Han	20	Total	accets (Part X line 16)			24,070,	263	23,899,612
A As	21				`. <del> </del>	2,865,		2,414,422
20	22			t line 21 from line 20	. 🗀	21,204,		21,485,190
Pai	t II		nature Block					· · · · · · · · · · · · · · · · · · ·
my kr	nowled	ge and		ramined this return, including accomp mplete Declaration of preparer (other				
		****	***			2016-01-14		
Sign	1		ature of officer			Date		
Here			TA CHAN DIRECTOR OF FINANCE & ADI	MIN				
		<u> </u>	e or print name and title					
			Print/Type preparer's name MATTHEW TROIANO CPA	Preparer's signature MATTHEW TROIANO CPA	Date 2016-01-1	Check I if self-employed	PTIN P01263	3939
Paid		_	Firm's name F ALEXANDER ARONSON	N FINNING & CO PC		Firm's EIN 🕨 0	4-257178	80
	pare		Fırm's address ► 21 EAST MAIN STREET	r		Phone no (508	) 366-91	100
use	Onl	у	WESTBORO, MA 0158					
		1	WESTBORD, MA UISC	· •				

✓ Yes ☐ No

Form	990 (2	(014)						Page <b>2</b>
Par	t III			ervice Accomp		Part III		٦
1	Briefl	y describe the org	janization's mis	sion				
				IONS AMONG ART ND, THE NATION			D FUNDERS, PO	WERING THE ARTS TO
2		•		nıficant program se	-	year which were not	t listed on	☐ Yes ☑ No
	•	s," describe these						, 100 , 110
3	Did th	e organization cea	ase conducting,	or make sıgnıfıcan		it conducts, any pro	gram	┌ Yes ┌ No
4	Descr expen	ibe the organizations Ses Section 501	on's program se (c)(3) and 501(	rvice accomplishm	are required to r	ts three largest prog eport the amount of		
	(Code	<u> </u>	) (Expenses \$	2,358,208	including grants of s	1,869,644	) (Revenue \$	)
	TIME '	TO AUDIENCES ACROS	SS NEW ENGLAND A URTURE A VIBRANT	AND THE NATION EXTE	ENDING BEYOND COR ELAUNCHED IN 1996	E GRANTMAKING FOR C , NDP HAS DISTRIBUTED	REATION AND TOURI	G DANCE ARTISTS OF OUR NG, NDP WORKS THROUGH ILLION IN FUNDING AND HAS
4b	EXTEN BUT A	NAL THEATER PROJECTIONS THE REACH AN LSO ANIMATES AN INF	D LÌFE ÓF THESE P FORMED, INTERAC	TES THE DEVELOPMENT	OURING MODELED OF DOUCING THEATERS,	LABORATIVE, ENSEMBLE N NEFA'S NATIONAL DAN PRESENTERS, AND ENSE	CE PROJECT, NTP NO	) TER WORK WHILE DT ONLY PROVIDES FUNDING TE THE FUNDED PROJECTS
	(Code	<u> </u>	) (Expenses \$	1,199,597	ıncludıng grants of s	<b>.</b>	) (Revenue \$	221,690 )
	PUBLI AND U	C DIPLOMACY INITIAT	TIVE OF THE U.S. D THE PERFORMING	EPARTMENT OF STATE'S ARTS TO FOSTER CULT	S BUREAU OF EDUCA	TIONAL AND CULTURAL A	AFFAIRS, THE PROGR	AMERICAN COMMUNITIES A AM IS PRODUCED BY NEFA N COMMUNITIES AS CITIZEN
	See /	Additional Data						
4d	Othe	r program service	es (Describe in :	Schedule O )				
	(Exp	enses \$	1,189,970	ıncludıng grants o	f\$	532,205)(Revenue	<b>\$</b>	23,172)
4e	Tota	l program service	expenses 🕨	5,850,006				
								Form <b>990</b> (2014)

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	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 $\chi^{\bullet}$	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		No
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		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	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		

Par	t 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 domestic 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 or for domestic individuals 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? <i>If "Yes," complete Schedule J.</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? 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), 501(c)(4), and 501(c)(29) 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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
	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? <i>If "Yes," complete Schedule R, Part I</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		Νo
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? 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?	20	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		<u></u>							
1-	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   4	<sub>7</sub>	Yes	No						
		<u>/</u>								
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	$\dashv$								
Ĭ	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	:4								
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		l							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo						
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								
<b>4a</b>	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)?									
ь	If "Yes," enter the name of the foreign country									
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)									
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		Νo						
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?									
		5c								
	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 gift were not tax deductible?	6 <b>b</b>								
7	Organizations that may receive deductible contributions under section 170(c).									
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required file Form 8282?	. 7c		Νo						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
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.						
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a	ıs								
h	required?	7g								
	Form 1098-C?	7h								
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8								
02	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter									
	Initiation fees and capital contributions included on Part VIII, line 12   10a									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter									
а	Gross income from members or shareholders									
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	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									
c	In which the organization is licensed to issue qualified health plans	$\dashv$								
	Did the organization receive any payments for indoor tanning services during the tax year?	 14a		Νo						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								

Section A. Governing Body and Management

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 a	v line in this Part VI	_	_	_	_	_	_	_	_	_	_	_	_	Ţ
encen n echeadie e	contains a response of more to a	.,	•		-		-	•	-	-	-	-	•	•	-,

			_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		22			
	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		22			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			with any • •	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co		3		No		
4	Did the organization make any significant changes to its governing documents since filed?	was	4		No		
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets	? .	5		Νo
6	Did the organization have members or stockholders?				6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			nt one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?				7b		No
8	Did the organization contemporaneously document the meetings held or written activear by the following	ions ui	ndertaken duri	ng the			
а	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, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>				9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the I	nternal R	even	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the I	nternal R	eveni	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	requi	ired by the I	nternal R	eveni 10a		
10a			s of such chap	• oters,			No
10a b	Did the organization have local chapters, branches, or affiliates?	 tıvıtıe: ıon's e	s of such chap	• oters, es?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization that the organization provided a complete copy of this Form 990 to all members of its	tivitie: ion's e ts gov	s of such chap xempt purpos erning body be	• oters, es? efore filing • •	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov  Form 9	s of such chap xempt purpos erning body be 	• oters, es? efore filing • •	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov  Form 9	s of such chap xempt purpos erning body be	oters, es? efore filing    	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov  Form 9  Ily inte	s of such chap exempt purpos erning body be a second of the contract of the co	oters, es? efore filing 	10a 10b 11a 12a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov  Form 9  Illy inte  n the p	s of such chap xempt purpos erning body be	eters, es? efore filing  uld give  " describe	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Ily inte . n the p	s of such chap exempt purpos erning body be ensured by the ensured	oters, es? efore filing    	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov  Form 9  Illy inte  n the p	s of such chap exempt purpos erning body be a series that countries of the	oters, es? efore filing    	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Ily inte . n the p . riew an	s of such chap xempt purpos erning body be rests that could be rests that could be rests that could approval by beration and described by the such as	oters, es? efore filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Ily inte . n the p . riew an	s of such chap xempt purpos erning body be rests that could be rests that could be rests that could approval by beration and described by the such as	oters, es? efore filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Ily inte . n the p . riew an	s of such chap xempt purpos erning body be rests that could be rests that could be rests that could approval by beration and described by the such as	oters, es? efore filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov  Form 9  Illy inte  in the p	s of such chap exempt purpos erning body be even to be	eters, es? efore filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov  Form 9  Illy inte  in the p  riew an ne deli  or sim  nization e step	s of such chap exempt purpos erning body be evaluate in to evaluate in to safeguard.	eters, es? efore filing uld give describe ent with a ts i the	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed►MA
- 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.

 $\overline{\hspace{-1em}\hspace{-1e$ 

- 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, address, and telephone number of the person who possesses the organization's books and records ►ANITA CHAN DIRECTOR OF FINANCE & ADMINISTRATION

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

#### 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) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h an or/tr	office	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ALEXANDER ALDRICH	1 00	х						0	0	0
DIRECTOR (2) SANDRA BURTON	1 00				_					
DIRECTOR	1 00	Х						0	0	0
(3) DAVID BURY	1 00	х						0	0	0
DIRECTOR		^						0	0	0
(4) BYRON CHAMPLIN	1 00	х		Х				0	0	0
SECRETARY		^		^				· ·	0	
(5) ANDREW CORNELL VICE CHAIR	1 00	х		х				0	0	0
(6) AMY ZELL ELLSWORTH	1 00									
DIRECTOR		Х						0	0	0
(7) DANIEL FORREST	1 00									-
DIRECTOR		Х						0	0	0
(8) GEOFF HARGADON	1 00	Х						0	0	0
DIRECTOR (9) JANE JAMES	1 00									
		Х						0	0	0
DIRECTOR (10) MARY KELLEY	1 00									
DIRECTOR		Х						0	0	0
(11) THEODORE LANDSMARK	1 00									
DIRECTOR		Х						0	0	0
(12) JEREMY LIU	1 00	x						0	0	0
DIRECTOR		,								
(13) PETER NESSEN	1 00	x						0	0	0
DIRECTOR (14) JOHN PLUKAS	1 00					$\vdash$				
TREASURER		Х		Х				0	0	0
	•					•				Form <b>990</b> (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers and	than on is a dir	one bot	not box h ar	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	from related organizations	Estir amount compe fron	F) mated of other nsation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Tri	Officei	Key employee	Highest compensat employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	and r	ization elated zations
		ë:	Trustee			nsated					
(15) JULIE RICHARD	1 00	x							0		0
DIRECTOR		^							9	Ĭ	
(16) ELIZABETH THEOBALD RICHARDS	1 00	x							0		0
DIRECTOR		^							٥	ď	
(17) ANDREA ROGERS	1 00	_						гэ	F0		0
DIRECTOR		X						5,2	50	٩	U
(18) RANDALL ROSENBAUM DIRECTOR	1 00	х							0	0	0
(19) LAWRENCE SIMPSON	1 00			Ī							_
CHAIR		X		X					0	٥	0
(20) VIRGINIA LUPI	1 00	.,									
DIRECTOR		X							0	٥	0
(21) CARRIE ZASLOW	1 00										
DIRECTOR		X							0		0
(22) DOUGLAS KEITH	1 00										
DIRECTOR		X							0	0	0
(23) LAURA PAUL	40 00										
INTERIM CO-ED, COO & ASST TREASURER				Х				95,7	06	0	26,279
(24) JANE PRESTON	40 00										
INTERIM CO-ED, DIR OF PROGRAMS & ASST SECRETARY	40 00			х				98,9	05	0	21,296
(25) CATHERINE EDWARDS	40 00			l <sub>x</sub>					0		0
ED STARTING 1/20/15				Ĺ.					<u> </u>	Ŭ.	
1b Sub-Total						<b>-</b>					
c Total from continuation sheets to Part	VII, Section A					•					
d Total (add lines 1b and 1c)		•				▶		199,861	0		47,575
Total number of individuals (including b \$100,000 of reportable compensation f				ed at	oove	e) who	rec	eived more thai	ו		
										Yes	No
3 Did the organization list any <b>former</b> offi on line 1a? <i>If "Yes," complete Schedule J</i>			e, key	/ em	ploy	yee, o	r hig	ghest compensa	ľ	3	No
4 For any individual listed on line 1a, is the organization and related organizations (									from the	-	
ındıvıdual			•	•	•	•	•			4	No
5 Did any person listed on line 1a receive services rendered to the organization?								-		5	No
Soction D. Indonondent Contracts											
Section B. Independent Contractor  Complete this table for your five highes		ındana	ndar	t cc	ntro	ctoro	that	t received more	than ¢100 000 o	f	
compensation from the organization Re											r
	(A)					-			(B)		C)

(A)	(B)	(C)
Name and business address	Description of services	Compensation
LISA BOOTH MANAGEMENT INC	PROGRAM COORDINATION	145,000
145 W 45TH STREET 602		
NEW YORK, NY 10036		

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 ►1

Part V	/	Statement of Check of Schedo	o <b>f Revenue</b> ule O contains a respor	nse or note to any lu	ne in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts Its	1a	Federated cam						
s, Grants Amounts	Ь	Membership du	es <b>1b</b>					
, Gi	c	Fundraising eve	ents <b>1c</b>					
iifts ar /	d	Related organiz	zations 1d					
ons, Gifte Similar	e	Government grant	s (contributions) <b>1e</b>	2,147,065				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above	4,354,109				
ifib Ott	g	Noncash contributi 1a-1f \$	ons included in lines	44,746				
Con' and	h	Total. Add lines	s 1a-1f	🙀	6,501,174			
				Business Code				
Program Serwce Revenue	2a	SERVICE FEES		900099	244,862	244,862		
Веч	ь							
10 e	С							
Serv	d							
E .	e							
uBo.	f	All other progra	am service revenue					
<u>~</u>	g		s 2a – 2f		244,862			
	3		ome (including dividen ar amounts)		202,242			202,24
	4		stment of tax-exempt bond					
	5	Royalties	<u></u>	•				
		_	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	-	expenses Rental income						
	С	or (loss)						
	d	Net rental inco	me or (loss)  (i) Securities	<b>►</b> - (II) Other				
	7a	Gross amount		(II) Other				
		from sales of assets other	1,210,962					
	ь	than inventory Less cost or						
		other basis and sales expenses	998,337					
	С	Gain or (loss)	212,625					
	d		ss)	· · · · •	212,625			212,63
<u>e</u>	8a	Gross income f events (not inc						
Other Revenue		\$	s reported on line 1c)					
Rev		See Part IV, lir						
-			a					
ĕ	b c		penses <b>b</b> (loss) from fundraising	events ►				
_			rom gaming activities					
		See Part IV, lir	ne 19					
	ь	less directey	penses b					
			(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
			a					
	b c		oods sold . . <b>b</b> (loss) from sales of invo	entory				
		Miscellaneous		Business Code				
	11a							
	ь							
	С							
	d		ue					
	e	Total. Add lines	s 11a-11d					
	12	Total revenue.	See Instructions .	🖊	7,160,903	244,862		414,8
					- , , - 30	, - 32		,.

### Part IX Statement of Functional Expenses

<u>Jectite</u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	3,205,240	3,205,240		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	11,671	11,671		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	386,364	131,254	178,723	76,387
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	1,021,972	545,010	368,077	108,885
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	36,109	18,933	12,777	4,399
9	Other employee benefits	103,706	59,823	34,098	9,785
10	Payroll taxes	104,776	51,340	40,012	13,424
11	Fees for services (non-employees)				
а	Management				
b	Legal	9,474	4,474	5,000	
С	Accounting	35,466	1,000	34,466	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	60,525		60,525	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	527,640	478,229	49,411	
12	Advertising and promotion	37,498	30,942	6,556	
13	Office expenses	76,096	38,243	33,043	4,810
14	Information technology	70,475	22,010	45,005	3,460
15	Royalties				
16	Occupancy	190,665	103,656	62,979	24,030
17	Travel	907,881	887,181	16,427	4,273
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	129,259	109,136	18,483	1,640
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	67,996	36,964	22,462	8,570
23	Insurance	8,521	350	8,171	
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	HONORARIA	114,550	114,550		
b	MISCELLANEOUS	4,828		4,828	
С					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	7,110,712	5,850,006	1,001,043	259,663
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)				

Form 990 (2014)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in the	nıs Part	X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	429,886
	2	Savings and temporary cash investments			370,800	2	494,245
	3	Pledges and grants receivable, net			7,965,466	3	7,346,388
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, diemployees, and highest compensated employees Complete Pa Schedule L	rt II of			5	
its	6	Loans and other receivables from other disqualified persons (as section 4958(f)(1)), persons described in section 4958(c)(3)(E employers and sponsoring organizations of section $501(c)(9)$ v beneficiary organizations (see instructions) Complete Part II of	3), and o	contributing y employees'		6	
4ssets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use		• •		8	
	9	Prepaid expenses and deferred charges		• •	143,361	ЬŤН	50,732
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	 	 804,805	·		30,732
	ь	Less accumulated depreciation	10b	599,102	246.820	10c	205,703
	11	Investments—publicly traded securities		<u> </u>	15,330,889		15,359,931
	12	Investments—other securities See Part IV, line 11			10,000,000	12	10,000,001
	13	Investments—program-related See Part IV, line 11				13	
	14			14			
		Intangible assets	12,727		12,727		
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			24,070,063		23,899,612
	17	Accounts payable and accrued expenses	163,594		178,625		
	18	Grants payable			2,584,274	18	2,161,488
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Sche	dule D		117,809	21	74,309
ilitie	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi					
Liabili		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 relat and other liabilities not included on lines 17-24) Complete Par		25			
	26	Total liabilities. Add lines 17 through 25		-	2,865,677	26	2,414,422
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ 5			2,000,077	20	2,717,722
φ		lines 27 through 29, and lines 33 and 34.	anu C	ompiece			
을	27	Unrestricted net assets			4,449,497	27	4,872,059
Assets or Fund Balance	28	Temporarily restricted net assets	16,754,889	28	16,613,131		
_ 	29	Permanently restricted net assets			, , ==	29	, , ,
Š		Organizations that do not follow SFAS 117 (ASC 958), check he	reb⊩ ⊏	and			
<u>-</u>		complete lines 30 through 34.	F	unu			
O .0	30	Capital stock or trust principal, or current funds				30	
φ	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ς. Ο	32	Retained earnings, endowment, accumulated income, or other fu		-		32	
Šet	33	Total net assets or fund balances		_	21,204,386		21,485,190
Ź	34	Total liabilities and net assets/fund halances		-	24 070 063		23 899 612

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,:	160,903
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,:	10,712
3	Revenue less expenses Subtract line 2 from line 1	3			50,191
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		21.3	 204,386
5	Net unrealized gains (losses) on investments	5			230,613
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		21.4	185,190
Par	t XII Financial Statements and Reporting				, , , , , , ,
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
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 review a separate basis, consolidated basis, or both	wed o	n		
	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	arate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	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?	ie	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:** 04-2593591

Name: NEW ENGLAND FOUNDATION FOR THE ARTS

**INCORPORATED** 

#### Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code ) (Expenses \$ 1,189,970 including grants of \$ 532,205 ) (Revenue \$ 23,172 )

OTHER PROGRAM SERVICES INCLUDE NEW ENGLAND PRESENTING AND TOURING, RESEARCH, DOCUMENTATION & EVALUATION, PUBLIC ART, SPONSORED PROJECTS, AND CREATIVE CITY

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493014006346

OMB No 1545-0047

### **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.

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

Open to Public Inspection

Name	of th	ne organization					Employer identifica	ation number
NEW E	NGLAN	D FOUNDATION FOR THE AR	TS INCORPORATI	ED			04 3503504	
Do	rt I	Doncon for Dubli	a Charity C	Status (All organiza	tions must so	malata this a	04-2593591	
		zation is not a private for		` 2			<u> </u>	) IIS.
	n gain	•		•	= -	•	•	
1	<u> </u>	A church, convention				n section 170(b	)(1)(A)(I).	
2	<u> </u>	A school described in						
3	<u> </u>	A hospital or a cooper		_				
4		A medical research or hospital's name, city,		erated in conjunction v	vith a hospital c	lescribed in <b>sec</b>	tion 170(b)(1)(A)(iii	i <b>).</b> Enter the
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by a	governmental unit d	escribed in
	·	section 170(b)(1)(A)			,	. ,	J	
6	Г	A federal, state, or loc		•	described in <b>s</b> e	ection 170(b)(1	)( <b>Δ</b> )(v).	
7	, V	An organization that n						neneral public
•	1*	described in <b>section 1</b>	•	•	• •	om a governme	incar unic or nom the g	general public
8	Г	A community trust de				tII)		
9	Г	An organization that n					outions, membership	fees, and gross
		receipts from activitie						
		its support from gross						
		acquired by the organi				•	•	
10	$\vdash$	An organization organ						
11	<u>'</u>	An organization organ	•	•	•	•		out the nurnoses of
	,	one or more publicly s						
		the box in lines 11a th			•			
а	Γ	<b>Type I.</b> A supporting of						
		supported organizatio				ty of the directo	rs or trustees of the	supporting
	_	organization You mus	=					
b	ı	Type II. A supporting	=	•			• • • • • • • • • • • • • • • • • • • •	•
		management of the su must complete Part IV			same persons t	nat control of it	ialiage the Supported	organization(s) You
С	Г	Type III functionally	•		n operated in c	onnection with,	and functionally inte	grated with, its
	•	supported organization	n(s) (see instr	uctions) <b>You must co</b>	mplete Part IV	, Sections A, D,	and E.	,
d	Г	Type III non-function						
		not functionally integr					ment and an attentiv	eness requirement
e	$\vdash$	(see instructions) Yo					a Type I Type II T	vne III functionally
	'	Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization						
f		Enter the number of supported organizations						
g		Provide the following information about the supported organization(s)						
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganization	(v) A mount of	(vi) A mount of
		organization		organization	listed in your	governing	monetary support	other support (see
				(described on lines	docume	ent?	(see instructions)	ınstructions)
				1-9 above or IRC				
				section (see instructions))				
				instructions))	Yes	No		
					1 63	1,10		
Tota	ı				1	1		I

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.)

Se	ection A. Public Support	•	<u> </u>		, ,	•		
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	(d) 2013	<b>(e)</b> 2014		<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	5,483,661	7,790,759	5,208,099	10,375,598	6,501	ι,174	35,359,291
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							
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions	5,483,661	7,790,759	5,208,099	10,375,598	6,501	.,174	35,359,291
-	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							20,735,585
6	(f) <b>Public support.</b> Subtract line 5 from line 4							14,623,706
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in) 🟲	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	( <b>d)</b> 2013	<b>(e)</b> 2014		<b>(f)</b> Total
7	Amounts from line 4	5,483,661	7,790,759	5,208,099	10,375,598	6,501	,174	35,359,291
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	142,535	182,242	163,592	190,381	202	,242	880,992
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support Add lines 7							36,240,283
12	through 10 L Gross receipts from related activiti	es, etc (see inst	ructions)			12		870,550
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
	Section C. Computation of Public Support Percentage							
14	Public support percentage for 2014			11, column (f))		14		40 350 %
15						36 200 %		
b	33 1/3% support test—2014. 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  33 1/3% support test—2013. 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  10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported							
b	organization  10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part VI how the organiza	nization meets the	e "facts-and-cırcı	umstances" test,	check this box ai	nd <b>stop here</b>		
10	supported organization				-			·
18	<b>Private foundation.</b> If the organizations	tion ala not check	k a pox on line 13,	, 10a, 16b, 1/a, (	or 1 / D, check this	s box and se	a	<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V  $\,)$ 

Section A. All Supporting Organizations
---

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)$ ? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see  The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

### Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes				
2 A mounts paid to perform activity that directly furthexcess of income from activity	2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity				
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons			
4 Amounts paid to acquire exempt-use assets					
5 Qualified set-aside amounts (prior IRS approval rec	nured)				
6 Other distributions (describe in Part VI) See instru	JCTIONS				
7 Total annual distributions. Add lines 1 through 6					
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide			
9 Distributable amount for 2014 from Section C, line	6				
10 Line 8 amount divided by Line 9 amount					
		(::)	(:::)		
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014		
1 Distributable amount for 2014 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)					
3 Excess distributions carryover, if any, to 2014					
<b>a</b> From 2009					
<b>b</b> From 2010					
<b>c</b> From 2011					
d From 2012					
<b>e</b> From 2013					
f Total of lines 3a through e					
g Applied to underdistributions of prior years					
h Applied to 2014 distributable amount  i Carryover from 2009 not applied (see instructions)					
j Remainder Subtract lines 3g, 3h, and 3i from 3f					
4 Distributions for 2014 from Section D, line 7 \$					
A pplied to underdistributions of prior years					
<b>b</b> Applied to 2014 distributable amount					
c Remainder Subtract lines 4a and 4b from 4					
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)					
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)					
7 Excess distributions carryover to 2015. Add lines 31 and 4c					
8 Breakdown of line 7					
<b>a</b> From 2010					
<b>b</b> From 2011					
<b>c</b> From 2012					
d From 2013					

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

#### DLN: 93493014006346

OMB No 1545-0047

Open to Public

### **SCHEDULE D**

(Form 990)

Department of the Treasury

### **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.

nal Revenue Service	Information about Schedule D (Form	1990) and its instructions is at <u>www.irs</u>	s.gov/fo	orm 990.	Inspecti	on
ame of the organ			Emplo	yer identifi	cation number	•
EW ENGLAND FOUNL	DATION FOR THE ARTS INCORPORATED		04-2	593591		
art I Orgai	nizations Maintaining Donor Adv	vised Funds or Other Similar Fu			ts. Complete	e if the
organ	<u>ızatıon answered "Yes" to Form 990</u>		_		·	
		(a) Donor advised funds	(	<b>b)</b> Funds and	d other accour	nts
Total number	<i>,</i>		-			
	ue of contributions to (during year)					
	ue of grants from (during year)					
	ue at end of year					
	ization inform all donors and donor advisor organization's property, subject to the or		or advis	ed	☐ Yes	┌ No
used only for conferring imp	ization inform all grantees, donors, and do charitable purposes and not for the benef permissible private benefit?	it of the donor or donor advisor, or for an	ny other		┌ Yes	┌ No
rt III Conse	ervation Easements. Complete If	the organization answered "Yes" to	o Form	990, Part	IV, line 7.	
Preservat Protection Preservat Complete line	conservation easements held by the org ion of land for public use (e g , recreation i of natural habitat ion of open space is 2a through 2d if the organization held a	or education) Preservation of an Preservation of a c	ertified	historic stru	ucture	
easement on	the last day of the tax year	Г		Held at th	ne End of the '	 Vear
Total number	of conservation easements		2a	Ticia at ti	ic End of the	· cui
Total acreage	restricted by conservation easements		2b			
_	nservation easements on a certified histo	ric structure included in (a)	2c			
	nservation easements included in (c) acq ture listed in the National Register	uired after 8/17/06, and not on a	2d			
Number of cor	nservation easements modified, transferr	ed, released, extinguished, or terminate	d by the	organizatio	n during	
the tax year 🕨	•					
Number of sta	ates where property subject to conservati	on easement is located 🕨				
Does the orga	nnization have a written policy regarding to fixe the conservation easements it holds?		— dling of v	ıolatıons, aı	nd <b>F Yes</b>	┌ No
Staff and volu	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents du	ring the yea	r	
A mount of exp	——— penses incurred in monitoring, inspecting	, and enforcing conservation easements	during	the year		
<b>►</b> \$						
	nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	l) above satisfy the requirements of sec	tion 170	)(h)(4)(B)(ı)	┌ Yes	┌ No
balance sheet	describe how the organization reports cor t, and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financial				
	nizations Maintaining Collection lete		or Oth	er Similaı	r Assets.	
works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	or resea	rch in furthe		с
works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education, o				с
(i) Revenue II	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii) Assets ind	cluded in Form 990, Part X			<b>►</b> \$		
If the organiza	ation received or held works of art, histor unts required to be reported under SFAS		r financ	ıal gaın, prov	vide the	
Revenue inclu	ided in Form 990, Part VIII, line 1			<b>►</b> \$		

**b** Assets included in Form 990, Part X

	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	eck	any of	the follo	owing that	are a	signific	ant use	of its	
	concector reams (eneck an enac appry)								_			
a j	Public exhibition		d	Γ	Loan	or excl	nange pro	grams	5			
ь [	Scholarly research		e	$\Gamma$	Othe	r						
c	Preservation for future generations											
	Provide a description of the organization's co Part XIII	llections and explai	ın hov	v the	y furth	er the o	rganızatıc	n's e	xempt pu	ırpose ı	n	
	During the year, did the organization solicit o assets to be sold to raise funds rather than t	o be maintained as	part o	f the	organ	ızatıon'	s collection	n?			Yes	┌ No
Part	Part IV, line 9, or reported an am						answer	ed "Y	es" to f	Form 9	90,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	forc	ontrib	utions c	or other as	sets	not	J	Yes	√ No
<b>b</b> 1	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	table							
										An	ount	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
	Did the organization include an amount on Fo									l	✓ Yes	┌ No
b j Pari	If "Yes," explain the arrangement in Part XII  Endowment Funds. Complete if											
Рагі	Endowment Funds. Complete I	(a)Current year		Prior			vo years ba				(e)Four	years back
1a	Beginning of year balance				,	<b> </b>		1	· · ·		,	<u> </u>
	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships							+				
	Other expenditures for facilities							+				
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g	, colun	nn (a)) h	neld as					
a I	Board designated or quasi-endowment ►											
b	Permanent endowment ►											
	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%										
3a /	Are there endowment funds not in the posses	sion of the organiza	ation t	hat	are hel	d and a	dmınıster	ed for	the			
(	organization by	_									Yes	No
	(i) unrelated organizations			•						. 3a(	_	<del> </del>
	<b>(ii)</b> related organızatıons If "Yes" to 3a(ıı), are the related organızatıor							•		. 3a(		<del> </del>
	Describe in Part XIII the intended uses of th	<u>=</u>									<u>'                                       </u>	
Part	VI Land, Buildings, and Equipme	<b>nt.</b> Complete if t				n ansv	vered 'Ye	s' to	Form 9	90, Pa	rt IV, l	ine
	11a. See Form 990, Part X, line 1  Description of property	.0.				or other	(b)Cost o			umulated	i (d) i	Book value
1- 1				+								
	and								+		-	
	uildings		•	-			1	10 702		217.0	14	1 000
	easehold improvements		•	$\vdash$			1	19,703	<del>                                     </del>	217,8		1,889
			•					06,157 78,945	1	104,80 276,4		1,297
	ther	gual Form 990 Part X		mn /	B) line	10(c)					20	202,517
TOLAI.	Add files to through te (Column (a) must et	quai i Oilli 330, Fail A	, coru	(	וווו , ,כם	. ±0(c <i>).)</i>		•			/Form	990) 2014

Part VII Investments—Other Securities. Co	mplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		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)	<b>•</b>	
Part VIII Investments—Program Related. C	Complete if the organizati	on 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
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
		90, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)	
Part X Other Liabilities. Complete if the org		-
Form 990, Part X, line 25.		, , ,
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		7
		-
		-
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>F</b>	
2 Linkship for an arrange to a position of the Doub VIII manage	do the tayt of the feet - t-	************************************

Par		evenue per Audited Financial State wered 'Yes' to Form 990, Part IV, line 1		nts With Revenue	per	Return Complete if
1		er support per audited financial statements			1	7,330,991
2	A mounts included on line 1 bu	ut not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a	230,61	3	
b	Donated services and use of fa	acılıtıes	2b			
c	Recoveries of prior year grant:	s	2c			
d	Other (Describe in Part XIII )		2d			
e	Add lines <b>2a</b> through <b>2d</b> .		·		2e	230,613
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	7,100,378
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>				
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a	60,52	5	
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>		· · ·		4c	60,525
5	Total revenue Add lines 3 and	d <b>4c.</b> (This must equal Form 990, Part I, line	12)		5	7,160,903
Par		xpenses per Audited Financial Stanswered 'Yes' to Form 990, Part IV, line			es pe	r Return. Complete
1		r audited financial statements			1	7,050,187
2	Amounts included on line 1 bu	it not on Form 990, Part IX, line 25				
a	Donated services and use of fa	acılıtıes	2a			
b	Prior year adjustments		2b			
С	Otherlosses		2c			
d	Other (Describe in Part XIII )		2d			
e	Add lines 2a through 2d				2e	0
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	7,050,187
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a	60,52	: 5	
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>				40	60,525
5	Total expenses Add lines <b>3</b> ai	nd <b>4c.</b> (This must equal Form 990, Part I, lin	e 18 )		5	7,110,712
Par	t XIII Supplemental Inf	formation			·	
Part		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and				vide any additional
	Return Reference	Explanation				
PART	IV, LINE 2B	NEFA WAS A FISCAL AGENT FOR THE MAGENCIES IN ACCORDANCE WITH NE ABOVE-MENTIONED AGENCIES, AS WE AND VERMONT STATE ARTS AGENCIES THESE AGENCIES ALSO FUNDS NEFA	FA'S B'	Y-LAWS, THE EXECU THE CONNECTICUT	TIVE [ , MAIN	DIRECTORS OF THE NE, RHODE ISLAND,

PART IV, LINE 2B	NEFA WAS A FISCAL AGENT FOR THE MASSACHUSETTS AND NEW HAMPSHIRE STATE ARTS AGENCIES IN ACCORDANCE WITH NEFA'S BY-LAWS, THE EXECUTIVE DIRECTORS OF THE ABOVE-MENTIONED AGENCIES, AS WELL AS THE CONNECTICUT, MAINE, RHODE ISLAND, AND VERMONT STATE ARTS AGENCIES, ARE ALSO BOARD MEMBERS OF NEFA EACH OF THESE AGENCIES ALSO FUNDS NEFA
PART X, LINE 2	NEFA ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH ASC TOPIC, INCOME TAXES THIS STANDARD CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT REGARDING A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN NEFA HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WHICH QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AT MAY 31, 2015 AND 2014 NEFA'S INFORMATION RETURNS ARE SUBJECT TO EXAMINATION BY THE FEDERAL AND STATE JURISDICTIONS AND GENERALLY REMAIN OPEN FOR THE MOST RECENT THREE YEARS
<u> </u>	Schedule D (Form 990) 2014

Jenedale 2 (1 31111 33 3) 23 13	i age <b>S</b>	
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I (Form 990)

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

OMB No 1545-0047

2014

DLN: 93493014006346

Dana dana ant of the Tree sum.	Comple	_	answered "Yes," to Form ► Attach to Form 990.	1990, Part IV, line 21 or	22.		pen to Public
Department of the Treasury Internal Revenue Service	► Information		Inspection				
Name of the organization			•			Employer identification	n number
NEW ENGLAND FOUNDATION I	FOR THE ARTS INCORP	ORATED				04-2593591	
Part I General Inform	ation on Grants an	d Assistance					
<ul><li>Does the organization main the selection criteria used</li><li>Describe in Part IV the org</li></ul>	to award the grants or as	ssistance?					▽Yes ┌N
				<b>Governments.</b> Com rt II can be duplicate			s" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Addıtıonal Data Table							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	•	
2	Enter total number of other organizations listed in the line 1 table	<b>b.</b>	

Part III Grants and Other Assistance to Domestic Individuals. 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>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) TOURING ADMINISTRATION SUPPORT	1	10,000			
(2) TRAVEL ASSISTANCE	2	1,671			

Part IV Supplemental Ir	<b>Iformation.</b> Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
,	NEFA MAINTAINS COMMUNICATION WITH GRANTEES AND REQUIRES FINAL AND/OR INTERIM REPORTS TO BE SUBMITTED BY GRANTEES REPORTS ARE REVIEWED BY APPROPRIATE GRANT STAFF AND DISBURSEMENTS OF GRANT FUNDS ARE MADE UPON APPROVAL OF REPORTS

Schedule I (Form 990) 2014

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 04-2593591

Name: NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVANCED BEGINNER GROUP INC125 KENSICO ROAD THORNWOOD,NY 10594	27-1711517		70,000				CREATION, OPERATING AND PRESENTATION SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALONZO KING LINES BALLET26 SEVENTH STREET SAN FRANCISCO,CA 94103	94-2933309		54,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALTERNATE ROOTS115 MARTIN LUTHER KING JR DRIVE SUITE 200 ATLANTA,GA 30303	58-1318198		14,575				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALVERNO COLLEGE - ALVERNO PRESENTS3400 SOUTH 43RD STREET MILWAUKEE, WI 532343922	39-0806263		7,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN DANCE FESTIVAL INCORPORATED PO BOX 90772 DURHAM,NC 27708	06-0932294		16,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN DANCE INSTITUTE INC1570 EAST JEFFERSON STREET ROCKVILLE, MD 20852	52-2158599		72,500				CREATION, OPERATING AND PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ART2ACTION INC8677 KEY ROYALE LANE 301 TAMPA,FL 33614	27-3413890		6,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ARTISTS FOR HUMANITY INC100 WEST SECOND STREET BOSTON,MA 02127	04-3138434		15,000				CREATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ARTS & BUSINESS COUNCIL OF GREATER BOSTON INC15 CHANNEL CENTER STREET 103 BOSTON,MA 02210	22-3217131		40,500				OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ARTS ALLIANCE OF NORTHERN NEW HAMPSHIREPO BOX 892 LITTLETON,NH 03561	02-0407490		16,717				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ARTS COUNCIL OF TAMWORTHPO BOX 1 TAMWORTH,NH 03886	51-0175669		5,840				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ASIA SOCIETY TEXAS CENTER1370 SOUTHMORE BLVD HOUSTON,TX 77004	03-0433949		9,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AXIS DANCE COMPANY 1428 ALICE STREET 200 OAKLAND,CA 94612	94-3124377		71,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BARD COLLEGE30 CAMPUS ROAD ANNANDALEONHUDSON,NY 125045000	14-1713034		29,750				OPERATING AND PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BARYSHNIKOV ARTS CENTER INC450 WEST 37TH STREET SUITE 501 NEWYORK,NY 10018	13-3031485		21,500			l	OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BERKELEY REPERTORY THEATRE999 HARRISON STREET BERKELEY,CA 94710	94-1679756		45,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BOSTON HARBOR ISLAND ALLIANCE15 STATE STREET 11TH FLOOR BOSTON,MA 02109	04-3268863		12,000				CREATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BROOKLYN ARTS EXCHANGE INC421 FIFTH AVENUE BROOKLYN,NY 11215	11-3071458		75,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BROWN UNIVERSITYBOX 1987 PROVIDENCE,RI 02912	05-0258809		10,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CALIFORNIA INSTITUTE OF THE ARTS24700 MCBEAN PARKWAY VALENCIA,CA 91355	95-6102146		50,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CARVER DEVELOPMENT BOARD215 NORTH HACKBERRY STREET SAN ANTONIO,TX 78202	74-2480343		7,284				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHARLESTOWN WORKING THEATER INCORPORATED 442 BUNKER HILL STREET CHARLESTOWN,MA 02129	04-2575578		10,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF CHICAGO 33 N LASALLE SUITE 700 CHICAGO,IL 60602	36-6005820		13,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COLLEGE OF THE ATLANTIC105 EDEN STREET BAR HARBOR, ME 046091198	23-7032625		8,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COMMUNITY THEATER PROJECT CORPORATION 5530 PENN AVENUE PITTSBURGH,PA 15206	31-1692848		5,909				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CONCORDIA COLLEGE CORPORATION901 SOUTH 8TH STREET MOORHEAD,MN 56562	41-0693977		10,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CONTEMPORARY ARTS CENTER44 EAST 6TH STREET CINCINNATI,OH 45202	31-0590095		7,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CONTEMPORARY ARTS CENTER900 CAMP STREET NEW ORLEANS, LA 70130	72-0798830		22,000				PRESENTATION SUPPORT		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CONTRA-TIEMPO4058 TILDEN AVENUE CULVER CITY,CA 90232	20-5477825		75,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DANSPACE PROJECT131 EAST 10TH STREET NEWYORK,NY 10003	13-3320972		24,700				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DC WHEEL PRODUCTIONS INC DANCE PLACE3225 8TH STREET NE WASHINGTON, DC 20017	52-1118504		11,429				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DEBATE SOCIETYPO BOX 283 BROOKLYN,NY 11222	74-3256898		9,800				CREATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DELTA STATE UNIVERSITY FOUNDATION INCPO BOX 3141 DSU CLEVELAND,MS 38733	64-6034675		7,000				PRESENTATION SUPPORT		

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DESERT DANCE THEATRE PO BOX 25332 TEMPE,AZ 85285	94-2857289		8,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DIVERSEWORKS INC4102 FANNIN STREET SUITE 200 HOUSTON,TX 77004	76-0035355		7,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DUDLEY STREET NEIGHBORHOOD INITIATIVE504 DUDLEY STREET ROXBURY,MA 02119	04-2859066		30,000				CREATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DUKE UNIVERSITYBOX 104132 DURHAM,NC 27708	56-0532129		14,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EDMONDS CENTER FOR THE ARTS410 FOURTH AVENUE NORTH EDMONDS,WA 98020	74-3089412		8,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ELEVATOR REPAIR SERVICE THEATER INC47 GREAT JONES STREET 3RD FLOOR NEW YORK, NY 10012	13-3787877		10,000				OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EMERSON COLLEGE ARTSEMERSON120 BOYLSTON STREET BOSTON,MA 02116	04-1286950		10,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EN GARDE ARTS INC120 HAMILTON AVENUE HASTINGS ON HUDSON, NY 10706	11-5347056		10,000				OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EVERETT9 DUNCAN AVENUE PROVIDENCE,RI 02906	05-0451784		7,000				OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FAIRFIELD UNIVERSITY 1073 NORTH BENSON ROAD FAIRFIELD,CT 06824	06-0646623		7,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FLYNN CENTER FOR THE PERFORMING ARTS LIMITED153 MAIN STREET BURLINGTON,VT 05401	03-0277052		27,763				PRESENTATION AND TRAVEL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FORT POINT ARTS COMMUNITY INC300 SUMMER STREET UNIT M1 BOSTON,MA 02210	04-2717403		7,500				CREATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FRACTURED ATLAS PRODUCTIONS INC248 WEST 35TH STREET 10TH FLOOR NEW YORK, NY 10001	11-3451703		33,540				CREATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FRANKLIN PARK COALITIONPO BOX 302333 BOSTON,MA 02130	04-2693908		10,000				CREATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GOAT IN THE ROAD PRODUCTIONS3726 DAUPHINE STREET 204 NEW ORLEANS, LA 70117	26-3248111		6,000				OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GUILFORD PERFORMANCE LAB INC561 FITCH ROAD GUILFORD,VT 05301	45-2398900		64,986				CREATION, OPERATING AND PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HILLSBOROUGH COMMUNITY COLLEGE39 COLUMBIA DRIVE TAMPA,FL 336063584	59-1219841		7,500				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
INTA INC246 WEST 38TH STREET 4TH FLOOR NEW YORK, NY 100185805	13-3913291		54,000				CREATION AND OPERATING SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
JACOB'S PILLOW DANCE FESTIVAL INC358 GEORGE CARTER ROAD BECKET, MA 012234001	04-6002993		25,500				PRESENTATION SUPPORT		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JAPAN SOCIETY INC333 EAST 47TH STREET APT 2R NEWYORK,NY 10017	13-1675082		58,500				CREATION, OPERATING AND PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JOHN MICHAEL KOHLER ARTS CENTER INC608 NEW YORK AVENUE SHEBOYGAN, WI 53081	39-1085180		9,500				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JUNEBUG PRODUCTIONS INC900 CAMP STREET NEW ORLEANS, LA 70130	72-1057381		6,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KAHILU THEATRE FOUNDATIONPO BOX 549 KAMUELA,HI 96743	99-0200138		6,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
KEENE STATE COLLEGE UNIVERSITY SYSTEM OF NH229 MAIN STREET KEENE,NH 03435	02-6000937		30,045				PRESENTATION AND TRAVEL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LEGION ARTS1103 THIRD STREET SE CEDAR RAPIDS,IA 052412305	42-1154136		8,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LOWER MANHATTAN CULTURAL COUNCIL125 MAIDEN LANE 2ND FLOOR NEWYORK,NY 10038	23-7348782		15,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
MASSACHUSETTS MUSEUM OF CONTEMPORARY ART FOUNDATION INC1040 MASS MOCA WAY NORTH ADAMS, MA 01247	04-3113688		6,400				PRESENTATION SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MAUI ARTS & CULTURAL CENTERONE CAMERON WAY KAHULUI,HI 96732	99-0222998		9,000, 9				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MIAMI DADE COUNTY 10950 SW 211 STREET MIAMI,FL 33189	59-6000573		7,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
MIAMI LIGHT PROJECT INCORPORATEDPO BOX 1048 MIAMI,FL 33137	65-0107810		27,220				PRESENTATION SUPPORT				

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MINNESOTA SHUBERT CENTER FOR DANCE AND MUSIC INC528 HENNEPIN AVENUE MINNEAPOLIS,MN 55403	27-1173436		9,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
MULTICULTURAL EDUCATION AND COUNSELING THROUGH THE ARTS1900 KANE STREET HOUSTON,TX 77007	74-2044904		6,810				PRESENTATION SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 DANCE THEATRE INC 119 PARK AVENUE WEST DENVER,CO 80205	84-0632111		54,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEW HAVEN INTERNATIONAL FESTIVAL OF ARTS AND IDEAS INC 195 CHURCH STREET FL 12 NEW HAVEN,CT 06510			48,370				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW YORK LIVE ARTS INC 219 WEST 19TH STREET NEW YORK, NY 10011	13-6206608		18,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ODC THEATER351 SHOTWELL STREET SAN FRANCISCO,CA 94110	94-3372711		9,600				PRESENTATION SUPPORT		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ON THE BOARDS100 WEST ROY STREET SEATTLE, WA 98119	91-1081983		82,000				CREATION, OPERATING AND PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PALM BEACH STATE COLLEGE FOUNDATION INC4200 CONGRESS AVENUE MS 62 LAKE WORTH,FL 33461	59-1818556		7,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PERFORMANCE ZONE INC 75 MAIDEN LANE SUITE 906 NEWYORK,NY 10038	13-3357408		129,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PERFORMING ARTS CENTER TRUST INC1300 BISCAYNE BOULEVARD MIAMI,FL 33132	65-0353695		7,600				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
PHILADELPHIA DANCE PROJECTS1427 SPRUCE STREET 1F PHILADELPHIA,PA 19102	23-2997324		9,000				PRESENTATION SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
PHILADELPHIA FRINGE FESTIVAL140 N COLUMBUS BLVD PHILADELPHIA,PA 19103	23-2936188		27,625				PRESENTATION SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PORTLAND INSTITUTE FOR CONTEMPORARY ART (PICA)415 SOUTHWEST 10TH SUITE 300 PORTLAND,OR 97205	93-1177971		34,200				PRESENTATION AND TRAVEL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PORTLAND OVATIONS50 MONUMENT SQUARE 2ND FLOOR PORTLAND,ME 04101	01-0350707		16,750				PRESENTATION AND TRAVEL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PRESIDENT AND TRUSTEES OF BATES COLLEGE2 ANDREWS ROAD 221 LANE HALL LEWISTON,ME 04240	01-0211781		20,800				PRESENTATION AND TRAVEL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PRESIDENTS AND FELLOWS OF MIDDLEBURY COLLEGE84 S SERVICE ROAD MIDDLEBURY,VT 05753	03-0179298		7,700				PRESENTATION AND TRAVEL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PUPPET SHOWPLACE INC 32 STATION STREET BROOKLINE, MA 024457388	04-2546402		6,320				PRESENTATION AND TRAVEL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
REGENTS OF THE UNIVERSITY OF MINNESOTA 2221 UNIVERSITY AVENUE SD STE 100 MINNEAPOLIS, MN 55414	41-6007513		7,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY INC185 KNEELAND STREET 2ND FLOOR BOSTON,MA 02111	20-1678932		25,000				CREATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ROY AND EDNA DISNEYCALARTS THEATER - REDCAT631 WEST 2ND STREET LOS ANGELES,CA 90012	95-6102146		25,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SANDGLASS THEATER CENTER FOR THEATER AND PUPPETRY RESEARCH PO BOX 970 PUTNEY,VT 05346	04-3340533		12,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SARATOGA PERFORMING ARTS CENTER INC108 AVENUE OF THE PINES SARATOGA SPRINGS,NY 12866	14-1466353		12,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SILVERMINE GUILD OF ARTISTS INC1037 SILVERMINE ROAD NEW CANAAN, CT 06840	06-0674168		11,471				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOCIETY FOR THE PERFORMING ARTS615 LOUISIANA ST SUITE 100 HOUSTON,TX 77002	74-6077505		7,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOUTH DALLAS CULTURAL CENTER ASSOCIATION 3400 SOUTH FITZHUGH AVENUE DALLAS,TX 752102972	75-2502465		14,283				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SPOLETO FESTIVAL USA14 GEORGE STREET CHARLESTON,SC 29401	57-0660848		8,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SPRINGBOARD FOR THE ARTS308 PRINCE STREET SUITE 270 ST PAUL,MN 55101	41-1690483		85,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ST JOSEPH'S HISTORIC FOUNDATION INC804 OLD FAYETTEVILLE STREET DURHAM,NC 27701	56-1152267		8,460				PRESENTATION SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TECO THEATRICAL PRODUCTIONS INC215 S TYLER STREET DALLAS,TX 75208	58-2069891		10,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS INTERNATIONAL THEATRICAL ARTS SOCIETY2100 ROSS AVENUE SUITE 650 DALLAS,TX 75201	75-1860146		13,300				PRESENTATION SUPPORT			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE CARPETBAG THEATRE INC1323 N BROADWAY KNOXVILLE,TN 37917	23-7138914		54,250				CREATION, OPERATING AND PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE DISCOVERY MUSEUMS 177 MAIN STREET ACTON,MA 01720	04-2741645		10,000				CREATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE FOUNDRY THEATRE INC140-142 SECOND AVENUE SUITE 405 NEW YORK, NY 10003	13-3761711		8,000				OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE JOHN AND MABLE RINGLING MUSEUM OF ART FOUNDATION INC5401 BAY SHORE ROAD SARASOTA,FL 34243	59-6214423		8,000				PRESENTATION SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE JOYCE THEATER FOUNDATION INC175 EIGHTH AVENUE NEWYORK,NY 10011	13-3038262		46,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE PRESIDENT AND TRUSTEES OF WILLIAMS COLLEGEPO BOX 624 WILLIAMSTOWN, MA 01267	04-2104847		17,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA LOS ANGELES 11000 KINROSS BLDG SUITE 211 LOS ANGELES,CA 90095	95-6006143		6,375				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 SELDOMS2427 BURR OAK AVENUE NORTH RIVERSIDE, IL 60546	36-4339110		47,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE UNIVERSITY OF TEXAS AT AUSTINPO BOX 7818 AUSTIN,TX 78713	74-6000203		10,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE YARD INCPO BOX 405 CHILMARK,MA 02535	23-7348937		26,920				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THEATER AND ARTS FOUNDATION OF SAN DIEGO COUNTYPO BOX 12039 LA JOLLA,CA 92039	95-1941117		7,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THEATER ET AL INC5-49 49TH AVENUE LONG ISLAND CITY,NY 11101	13-4038993		7,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THEATER MITU INCPO BOX 1114 OLD CHELSEA STATION NEW YORK,NY 101131114	03-0539644		40,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THIN MAN DANCE INC140 SECOND AVENUE SUITE 501 NEW YORK, NY 10003	13-3922974		67,500				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TICKLE THE SLEEPING GIANT INC140 2ND AVENUE SUITE 404 NEWYORK,NY 10003	33-1020155		49,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TRINITY COLLEGE300 SUMMIT STREET HARTFORD,CT 061063100	06-0646927		7,500				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TRUSTEES OF DARTMOUTH COLLEGE7 LEBANON STREET SUITE 302 HANOVER,NH 03755	02-0222111		27,200				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TWYLA THARP DANCE FOUNDATION INC336 CENTRAL PARK WAPT 17AB NEWYORK,NY 10025	13-2667790		54,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UC SAN DIEGO FOUNDATION9500 GILMAN DRIVE MC 0940 LA JOLLA,CA 920930940	95-2872494		15,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIQUE PROJECTS INCORPORATED75 BROAD STREET SUITE 304 NEWYORK,NY 10004	13-3085289		54,000				CREATION AND OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY MUSICAL SOCIETY881 NORTH UNIVERSITY AVENUE ANN ARBOR, MI 481091011	38-1545881		6,875				PRESENTATION SUPPORT			

<u>  Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF HOUSTON SYSTEMPO BOX 988 HOUSTON,TX 770010988			10,000				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MASSACHUSETTS333 SOUTH STREET SUITE 450 SHREWSBURY, MA 015454176	04-3167352		23,660				PRESENTATION AND TRAVEL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL104 AIRPORT DRIVE CAMPUS BOX 1220 CHAPEL HILL, NC 275991220	56-6001393		8,375				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NORTH CAROLINA AT WILMINGTON601 SOUTH COLLEGE ROAD WILMINGTON, NC 284035934	56-1258660		16,000				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF VERMONT AND STATE AGRICULTURAL COLLEGE 340 WATERMAN BUILDING 85 SOUTH PROSPECT STREET BURLINGTON, VT 05405	03-0179440		5,200				PRESENTATION AND TRAVEL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VIETNAMESE AMERICAN INITIATIVE FOR DEVELOPMENT INC42 CHARLES ST SUITE E DORCHESTER,MA 02122	04-3289039		10,000				CREATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VIRGINIA POLYTECHNIC INSTITUTE & STATE UNIVERSITY300 TURNER STREET NW SUITE 330 BLACKSBURG, VA 24061	54-6001805		8,875				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VISIONINTOART PRESENTS INC25 COLUMBUS CIRCLE 68B NEWYORK,NY 10019	13-4158573		75,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WALKER ARTS CENTER 1750 HENNEPIN AVENUE MINNEAPOLIS, MN 55403	41-0693929		59,500				PRESENTATION SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WALLIS ANNENBERG CENTER FOR THE PERFORMING ARTS9390 NORTH SANTA MONICA BLVD BEVERLY HILLS,CA 90210	95-4467830		10,500				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WELLESLEY COLLEGE106 CENTRAL STREET WELLESLEY,MA 02481	04-2103637		6,150				PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESLEYAN UNIVERSITY 237 HIGH STREET MIDDLETOWN,CT 06459	06-0646959		30,830				OPERATING AND PRESENTATION SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WORKING GROUP THEATRE INC354 FERSON AVENUE IOWA CITY,IA 522463510	27-2997323		45,000				CREATION AND OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD MUSIC INCORPORATED720 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	22-3036665		9,600				PRESENTATION SUPPORT

Form 990,Schedule 1, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Z-SPACE STUDIO 499 ALABAMA STREET 450 SAN FRANCISCO, CA 94110	94-3177230		28,000				OPERATING AND PRESENTATION SUPPORT

DLN: 93493014006346

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

**SCHEDULE M** 

(Form 990)

▶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 <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

**Noncash Contributions** 

Inspection

	ne of the organization / ENGLAND FOUNDATION FOR THE ARTS INCORPORATED					Employer identification number						
						04-2593591						
Pa	TTI 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 1 g	n	Method of o noncash contri		_	nts			
	Art—Works of art											
_	Art—Historical treasures .											
	Art—Fractional interests											
	Books and publications											
5	Clothing and household											
6	goods											
	Boats and planes											
	Intellectual property											
	Securities—Publicly traded .											
	Securities—Closely held stock .											
	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											
	Other►(	X	2	35,2	281	FAIR VALUE						
	TWARE LICENSES )											
	Other►( ERVICES)	X	2	7,0	000	FAIR VALUE						
	Other ► (	X	1	2 (	000	FAIR VALUE						
	IGN SERVICES )			2,0	,,,,	TAIR VALUE						
28	Other►( ERING)	Х	1	2	250	FAIR VALUE						
	Other►(	X	1	2	15	FAIR VALUE						
	GLE AD WORDS )	_				1						
	Number of Forms 8283 received by t for which the organization completed				29			Yes	No			
30a	During the year, did the organization	receive by	contribution any property r	reported in Part I lines	s 1 t	through 28 that		162	140			
	it must hold for at least three years t											
	for exempt purposes for the entire ho			, and which is not requ			30a		No			
h	If "Yes," describe the arrangement i				•		30a		INU			
31	Does the organization have a gift ac	ceptance po	licy that requires the revie	w of any non-standard	l cor	ntributions?	31		No			
32a	Does the organization hire or use thi contributions?	rd parties oi	r related organizations to s	olicit, process, or sell	non	cash	32a		No			
b	If "Yes," describe in Part II								_			
22	If the organization did not report an	amount in co	olumn (a) for a tuna of aron	arty for which column	/a \ .	s shaskad		1	i			

describe in Part II

Page 2

Schedule M (Form 990) (2014)

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

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493014006346

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

NEW ENGLAND FOUNDATION FOR THE ARTS INCORPORATED

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Name of the organization

Return Reference

Department of the Treasury

Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ 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.

**Explanation** 

990 Schedule O, Supplemental Information

Employer identification number

04-2593591

Tetarii Kererenee	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS REVIEWED BY THE BOARD OF DIRECTORS BEFORE SUBMISSION, AND SIGNED BY THE DIRECTOR OF FINANCE & ADMIN OR THE EXECUTIVE DIRECTOR
FORM 990, PART VI, SECTION B, LINE 12C	ANNUAL STATEMENTS ARE REVIEWED BY THE BOARD CHAIR (FOR BOARD MEMBERS) OR EXECUTIVE DIRECTO R (FOR STAFF MEMBERS) AND, IN THE EVENT OF A CONFLICT, ACTION AS DEFINED IN THE CONFLICT OF INTEREST POLICY IS TAKEN
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE DIRECTOR'S PERFORMANCE IS EVALUATED ANNUALLY BY THE CHAIR OF THE BOARD OF DI RECTORS WITH INVOLVEMENT OF OTHER MEMBERS OF THE COMPENSATION COMMITTEE AS APPROPRIATE TH E COMPENSATION COMMITTEE ANNUALLY REVIEWS AND SETS EXECUTIVE DIRECTOR COMPENSATION AND BEN EFITS WITH REFERENCE TO COMPARABLES OF SIMILAR AGENCIES AND NON-PROFIT ORGANIZATIONS THE BOARD AND THE COMPENSATION COMMITTEE KEEP MINUTES TO DOCUMENT KEY DISCUSSION POINTS AND DE CISIONS REACHED THE COMPENSATION COMMITTEE CONSISTS OF THE OFFICERS OF THE BOARD THE COM PENSATION OF OTHER EMPLOYEES IS REVIEWED AND APPROVED ANNUALLY BY THE EXECUTIVE DIRECTOR
FORM 990, PART VI, SECTION C, LINE 19	NEFA'S FINANCIAL STATEMENTS ARE POSTED ON ITS WEBSITE, AND DOCUMENTS ARE MADE AVAILABLE UPON REQUEST
FORM 990, PART XII, LINE 2C	THE FINANCE AND AUDIT COMMITTEE OVERSEES THE SELECTION OF THE AUDITORS AND MEETS WITH THE AUDITORS AT THE CONCLUSION OF THE AUDIT PROCESS TO REVIEW THE YEAR-END RESULTS