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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

NEW YORK HALL OF SCIENCE

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

47-01 111TH STREET

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

CORONA, NY 11368

F Name and address of principal officer

MARGARET HONEY

47-01 111TH STREET

CORONA, NY 11368

D Employer identification number

11-2104059

E Telephone number

(718) 699-0005

G Gross receipts \$ 23,673,243

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: HTTP //WWW.NYSCI.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1964

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

SEE SCHEDULE O FOR ORGANIZATION'S MISSION STATEMENT IN FULL

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

3 Number of voting members of the governing body (Part VI, line 1a) 40

4 Number of independent voting members of the governing body (Part VI, line 1b) 40

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 353

6 Total number of volunteers (estimate if necessary) 192

7a Total unrelated business revenue from Part VIII, column (C), line 12 0

7b Net unrelated business taxable income from Form 990-T, line 34 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 10,502,888

9 Program service revenue (Part VIII, line 2g) 3,406,191

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 350,258

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,000,377

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15,259,714

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 412,649

14 Benefits paid to or for members (Part IX, column (A), line 4) 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 13,386,459

16a Professional fundraising fees (Part IX, column (A), line 11e) 0

16b Total fundraising expenses (Part IX, column (D), line 25) 1,219,949

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 9,465,049

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 23,264,157

19 Revenue less expenses Subtract line 18 from line 12 -8,004,443

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 59,627,770

21 Total liabilities (Part X, line 26) 1,587,486

22 Net assets or fund balances Subtract line 21 from line 20 58,040,284

Part II Signature Block

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

Signature of officer

2020-04-27

Date

MARGARET HONEY PRESIDENT & CHIEF EXECUTIVE OFFICER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date 2020-04-27

Check ☐ if self-employed

PTIN P00543209

Firm's name PKF O'CONNOR DAVIES LLP

Firm's EIN 27-1728945

Firm's address 665 FIFTH AVENUE

NEW YORK, NY 10022

Phone no (212) 286-2600

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

NYSCI'S MISSION IS TO NURTURE GENERATIONS OF PASSIONATE LEARNERS, CRITICAL THINKERS, AND ACTIVE CITIZENS THROUGH DESIGN, MAKE, PLAY A NOVEL APPROACH TO LEARNING AND ENGAGEMENT THAT DRAWS UPON RESEARCH ON DEEPER LEARNING AND SUPPORTS THE CREATION OF LEARNING EXPERIENCES THAT DEVELOP CRITICAL THINKING, KNOWLEDGE INTEGRATION, CREATIVITY, AND INNOVATION OUR ASPIRATION IS TO CREATE RESOURCES THAT HAVE A MEASURABLE AND SCALABLE IMPACT ON HOW PEOPLE LEARN THE MUSEUM ANCHORS AND INSPIRES ALL THE WORK THAT WE DO, FOSTERING PUBLIC ENGAGEMENT IN STEM, SUPPORTING OUR YOUTH PROGRAMMING, EDUCATION OFFERINGS, AND RESEARCH WE HAVE DEVELOPED INNOVATIVE PRODUCTS TO EXTEND LEARNING FAR BEYOND OUR WALLS, AND OUR EXTENSIVE NETWORK OF PARTNERSHIPS DEEPENS AND BROADENS OUR IMPACT, LOCALLY AND AROUND THE WORLD

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

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

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

If "Yes," describe these changes on Schedule O

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

4a	(Code)	(Expenses \$	9,556,717	including grants of \$	(Revenue \$	2,435,465)
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See Additional Data

4b	(Code)	(Expenses \$	4,565,831	including grants of \$	172,905)	(Revenue \$)
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See Additional Data

4c	(Code)	(Expenses \$	3,080,385	including grants of \$	(Revenue \$	996,702)
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See Additional Data

(Code)	(Expenses \$	2,481,860	including grants of \$	10,000)	(Revenue \$)
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YOUTH DEVELOPMENT THROUGH OUR SIGNATURE YOUTH EMPLOYMENT AND EMPOWERMENT PROGRAM, THE SCIENCE CAREER LADDER, 165 HIGH SCHOOL AND COLLEGE STUDENTS HELPED ORIENT VISITORS TO THE MUSEUM AND UNDERSTAND STEM CONCEPTS IN ADDITION, THEY PARTICIPATED IN MENTORING, PROFESSIONAL DEVELOPMENT, AND COLLEGE AND CAREER PREPARATION OVER THE LAST THREE DECADES, 95 PERCENT OF THE YOUNG PEOPLE PARTICIPATING IN THIS PROGRAM HAVE GONE ON TO COLLEGE, WITH 70 PERCENT DECLARING MAJORS IN STEM

4d Other program services (Describe in Schedule O)

(Expenses \$	2,481,860	including grants of \$	10,000)	(Revenue \$	)
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4e	Total program service expenses	19,684,793
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	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 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26 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? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 Yes	

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 113	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	353			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		No
b If "Yes," enter the name of the foreign country See instructions for filing requirements for 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		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?				8		
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

Part VI

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

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

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

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

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ► MARGARET HONEY PRESIDENT & CEO 47-01 111TH STREET CORONA, NY 11368 (718) 699-0005

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

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

1

● 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

[illegible]

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	2,171,758	0	464,836

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 17

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DESIGN IO 101 H ST SUITE 1 PETALUMA, CA 94952	IT DESIGN & CONSULTING	309,817
GC BALLROOM OPERATOR LLC 110 EAST 42ND ST NEW YORK, NY 10017	GALA SERVICES	263,823
LIFT MARKETING PO BOX 4554 SARATOGA SPRINGS, NY 12866	MARKETING AND PROMOTIONS	229,058
IMAGINE EXHIBITIONS INC 2670 PEACHTREE ROAD NW SUITE 418 ATLANTA, GA 30305	EXHIBITION FEE	139,000
THE ICKES & ENRIGHT GROUP 1300 CONNECTICUT AVENUE NW SUITE 60 WASHINGTON, DC 20036	LOBBYING	130,050

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 ► 6

Part VIII		Statement of Revenue			
Check if Schedule O contains a response or note to any line in this Part VIII ☐					
		(A)	(B)	(C)	(D)
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a			
	b Membership dues . . .	1b	580,050		
	c Fundraising events . . .	1c	1,243,794		
	d Related organizations	1d			
	e Government grants (contributions)	1e	5,860,103		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,632,367		
	g Noncash contributions included in lines 1a - 1f \$		1,065,425		
	h Total. Add lines 1a-1f		14,316,314		
Program Service Revenue	2a ADMISSIONS	Business Code			
		713990	2,436,204	2,436,204	
	b PUBLIC PROGRAMS	611710	537,989	537,989	
	c EDUCATION/TRAINING	611710	457,974	457,974	
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		3,432,167		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		138,822		138,822
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties		1,845		1,845
	6a Gross rents	(i) Real (ii) Personal			
		617,985			
	b Less rental expenses	282,426			
	c Rental income or (loss)	335,559			
	d Net rental income or (loss)		335,559		335,559
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
		4,256,600			
	b Less cost or other basis and sales expenses	4,119,382			
	c Gain or (loss)	137,218			
	d Net gain or (loss)		137,218		137,218
	8a Gross income from fundraising events (not including \$ 1,243,794 of contributions reported on line 1c) See Part IV, line 18	a	498,561		
	b Less direct expenses	b	328,361		
	c Net income or (loss) from fundraising events		170,200		170,200
	9a Gross income from gaming activities See Part IV, line 19	a			
	b Less direct expenses	b			
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances	a			
	b Less cost of goods sold	b			
	c Net income or (loss) from sales of inventory				
Miscellaneous Revenue	Business Code				
11a PARKING LOT INCOME	812930	165,378		165,378	
b GIFT SHOP	453220	123,842		123,842	
c RESTAURANT/CATERING	722210	41,806		41,806	
d All other revenue		79,923		79,923	
e Total. Add lines 11a-11d		410,949			
12 Total revenue. See Instructions		18,943,074	3,432,167	0	1,194,593

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	182,905	182,905		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	1,867,683	1,505,402	239,625	122,656
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.	8,609,206	6,939,890	1,111,267	558,049
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	894,048	710,809	119,172	64,067
9 Other employee benefits.	1,509,686	1,201,866	195,467	112,353
10 Payroll taxes.	893,625	712,009	118,417	63,199
11 Fees for services (non-employees):				
a Management.				
b Legal.	825		825	
c Accounting.	77,400		77,400	
d Lobbying.	246,022	246,022		
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	43,753		43,753	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	829,199	735,077	67,593	26,529
12 Advertising and promotion.	258,095	254,437	819	2,839
13 Office expenses.	685,841	565,817	60,438	59,586
14 Information technology.	625,592	460,538	106,760	58,294
15 Royalties.				
16 Occupancy.				
17 Travel.	151,786	114,982	31,511	5,293
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	41,240	25,832	10,366	5,042
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	5,188,567	5,034,069	84,505	69,993
23 Insurance.	209,668	205,303	2,494	1,871
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 UBI TAX PAYMENT	14,204		14,204	
b EXHIBIT RENTAL & MAINT	572,194	531,966	13,649	26,579
c OTHER OPERATING EXPENSE	427,361	94,914	291,035	41,412
d PARTICIPANT COSTS	90,870	90,845		25
e All other expenses	75,354	72,110	1,082	2,162
25 Total functional expenses. Add lines 1 through 24e.	23,495,124	19,684,793	2,590,382	1,219,949
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	736,061	1	971,155
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	3,513,531	3	4,430,578
	4 Accounts receivable, net	353,977	4	427,257
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	321,118	9	134,259
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	94,752,784		
	b Less: accumulated depreciation	51,728,887		
		47,136,324	10c	43,023,897
	11 Investments—publicly traded securities	7,566,759	11	6,451,569
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	59,627,770	16	55,438,715
Liabilities	17 Accounts payable and accrued expenses	1,380,285	17	1,365,784
	18 Grants payable		18	
	19 Deferred revenue	200,473	19	268,360
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	6,728	25	186
	26 Total liabilities. Add lines 17 through 25	1,587,486	26	1,634,330
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	50,145,474	27	46,723,527
	28 Temporarily restricted net assets	7,894,810	28	7,080,858
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	58,040,284	33	53,804,385
	34 Total liabilities and net assets/fund balances	59,627,770	34	55,438,715

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,943,074
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,495,124
3	Revenue less expenses Subtract line 2 from line 1	3	-4,552,050
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	58,040,284
5	Net unrealized gains (losses) on investments	5	316,151
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	53,804,385

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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	Yes	

Additional Data

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

Form 990 (2018)

Form 990, Part III, Line 4a:

MUSEUM EXPERIENCES NYSCI IS THE LARGEST HANDS-ON SCIENCE MUSEUM IN NEW YORK, WELCOMING 500,000 VISITORS A YEAR. IT OFFERS ONE-OF-A-KIND OPPORTUNITIES TO LEARN THROUGH MORE THAN 450 EXHIBITS, AS WELL AS LARGE-SCALE EXPERIENCES, COMMUNITY-ANCHORED AFTER-SCHOOL PROGRAMS AND CAMPS, MAKER SPACE WORKSHOPS AND ACADEMIC CONFERENCES. NYSCI HAS PROGRAMS FOR EVERY AGE AND LEVEL OF SCIENTIFIC INTEREST, FROM TODDLERS TO ADULTS, CASUAL VISITORS TO FUTURE STEM PROFESSIONALS. THESE INCLUDE NYSCI AFTER DARK, WHICH BRINGS 20- AND 30-SOMETHINGS TO SPECIAL AFTER-HOURS PROGRAMS ON SUBJECTS LIKE BEEKEEPING, ASTRONOMY AND THE DESIGN OF HOLLYWOOD SPECIAL EFFECTS, ACCESS, WHICH PAIRS WORKING SCIENTISTS WITH PROFESSIONAL ARTISTS AND DESIGNERS TO DISCOVER NEW WAYS OF ACCESSING THE SCIENTIFIC CONCEPTS BEHIND OUR EXHIBITS, AND OUR STEM EXPO, WHICH GIVES YOUTH A PLATFORM TO LEARN ABOUT EDUCATIONAL AND CAREER OPPORTUNITIES IN STEM.

Form 990, Part III, Line 4b:

RESEARCH AND DEVELOPMENT NYSCI IS A DYNAMIC LABORATORY FOR LEARNING TEN DOCTORATE-LEVEL LEARNING SCIENTISTS AND 50 SCIENCE EDUCATORS, EXHIBIT DEVELOPERS AND PROGRAM EXPERTS AT NYSCI CARRY OUT AND APPLY RESEARCH ON THE MOST EFFECTIVE, ENGAGING WAYS TO SUPPORT STEM LEARNING FOR DIVERSE AUDIENCES OUR RESEARCH INFORMS THE DESIGN OF ALL OF OUR EXHIBITS, OUR PROGRAMS FOR YOUTH, COMMUNITY MEMBERS AND EDUCATORS, AND OUR GROUNDBREAKING DIGITAL APPS AND GAMES BEYOND NYSCI, THIS WORK IS BUILDING AN EVIDENCE BASE FOR SUCCESSFUL STEM EDUCATION WITH DIVERSE AUDIENCES THROUGH RESEARCH GRANTS FROM THE U S NATIONAL SCIENCE FOUNDATION, DEPARTMENT OF EDUCATION, NATIONAL INSTITUTES OF HEALTH, AND PRIVATE SUPPORTERS, WE INVESTIGATED TOPICS RANGING FROM HOW TO TEACH DATA SCIENCE TO THE YOUNGEST LEARNERS, TO INTEGRATING COMPUTATIONAL THINKING INTO A DIGITAL GAME AND MIDDLE SCHOOL CURRICULUM THIS RESEARCH HELPS NYSCI CREATE INNOVATIVE PROGRAMS FOR FAMILIES AND EDUCATORS, OFFER EQUITABLE OPPORTUNITIES FOR LEARNERS TO DISCOVER THE IMPACT WE CAN HAVE ON THE WORLD AROUND US, DESIGN PLAYFUL, INVITING PATHWAYS INTO UNDERSTANDING COMPLEX SYSTEMS LIKE OUR ENVIRONMENT, OUR CITIES, AND OUR DIGITAL NETWORKS, AND INSPIRE A DIVERSE GENERATION OF YOUNG PEOPLE TO PURSUE CAREERS IN SCIENCE, TECHNOLOGY, ENGINEERING AND MATH

Form 990, Part III, Line 4c:

EDUCATION NYSCI IS ONE OF THE MOST SUCCESSFUL DEVELOPERS OF DIVERSE STEM TALENT IN THE UNITED STATES OUR LADDER OF LEARNING INCLUDES OPPORTUNITIES FOR STUDENTS FROM PRE-K TO COLLEGE TO GAIN STEM COMPETENCIES, LEARN 21ST CENTURY SKILLS, AND DISCOVER PATHWAYS TO ACADEMIC AND CAREER SUCCESS THIS YEAR, WE DELIVERED EARLY CHILDHOOD PROGRAMMING TO MORE THAN 5,000 PARTICIPANTS THROUGH FAMILY WORKSHOPS, COMMUNITY EVENTS AND PUBLIC PROGRAMS THROUGH AFTER-SCHOOL PROGRAMS AND CAMPS, DOZENS OF MIDDLE SCHOOLERS PARTICIPATED IN INVESTIGATIONS OF NEIGHBORHOOD PROBLEMS AND USED DESIGN-THINKING APPROACHES TO CREATE THEIR OWN SOLUTIONS AND MORE THAN 2,000 HIGH SCHOOL AND COLLEGE STUDENTS TOOK ADVANTAGE OF EXPERIENCES THAT CONNECTED THEM TO STEM PROFESSIONALS AND HELPED THEM ACQUIRE IMPORTANT SKILLS NECESSARY TO SUCCEED IN COLLEGE AND CAREERS THE COMMUNITY NYSCI SERVES IS ONE OF THE MOST DIVERSE AND VIBRANT IN THE COUNTRY, AND IS CRITICALLY UNDERSERVED THE NYSCI NEIGHBORS INITIATIVE EMBODIES OUR COMMITMENT TO RESPONDING TO LOCAL NEEDS, PROVIDING AFTER-SCHOOL STEM ENRICHMENT AND PARENTAL ENGAGEMENT OPPORTUNITIES FREE OF CHARGE TO 1,000+ FAMILIES

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FRANCISCO D'SOUZA CO-CHAIR	1 00	X		X				0	0	0
MELISSA G VAIL CO-CHAIR	10 00	X		X				0	0	0
STUART FISCHER SECRETARY	1 00	X		X				0	0	0
MARTIN R KUPFERBERG TREASURER	3 00	X		X				0	0	0
GILDA A BARABINO TRUSTEE	1 00	X						0	0	0
AL BUNSHAFT TRUSTEE	2 00	X						0	0	0
ED CHAN TRUSTEE	0 25	X						0	0	0
GUY CHIARELLO TRUSTEE	1 00	X						0	0	0
DAVID CHRISTMAN TRUSTEE	1 00	X						0	0	0
DAVID CHUBAK TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RAVENEL CURRY III TRUSTEE	2 00	X						0	0	0
ATUL DUBEY TRUSTEE	0 50	X						0	0	0
SETH H DUBIN TRUSTEE	1 00	X						0	0	0
ANNA M EWING TRUSTEE	1 00	X						0	0	0
JOSEPH R FICALORA TRUSTEE	1 00	X						0	0	0
JAMES A FIRESTONE TRUSTEE THRU 02/19/19	0 50	X						0	0	0
DARIO GIL TRUSTEE	0 50	X						0	0	0
JOHN J GILBERT III TRUSTEE	1 00	X						0	0	0
EDWARD D HOROWITZ TRUSTEE	2 00	X						0	0	0
FRANS JOHANSSON TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARY E KELLY TRUSTEE	0 50	X						0	0	0
JAMES KOREIN TRUSTEE	1 00	X						0	0	0
ARVIND KRISHNA TRUSTEE THRU 03/20/19	1 00	X						0	0	0
HENDRIK LAMMERS TRUSTEE	1 00	X						0	0	0
JEFFREY R LIBSHUTZ TRUSTEE THRU 12/31/18	1 00	X						0	0	0
YVONNE LIU TRUSTEE	1 00	X						0	0	0
PAUL J MADDON TRUSTEE	1 00	X						0	0	0
MARY JANE MCCARTNEY TRUSTEE	3 00	X						0	0	0
LOUIS MODANO TRUSTEE	1 00	X						0	0	0
MARTEZ R MOORE TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JACLYN A MUCARIA TRUSTEE	1 00	X						0	0	0
DEVESH RAJ TRUSTEE THRU 7/12/19	1 00	X						0	0	0
STEPHEN H SANDS TRUSTEE	3 00	X						0	0	0
LINDA S SANFORD TRUSTEE	1 00	X						0	0	0
RUSSELL SARDER TRUSTEE THRU 5/15/19	1 00	X						0	0	0
SARA LEE SCHUPF TRUSTEE	0 50	X						0	0	0
ANIL SHRIVASTAVA TRUSTEE	3 00	X						0	0	0
ALAN SINSHEIMER TRUSTEE	1 00	X						0	0	0
JEANNE M SULLIVAN TRUSTEE	2 00	X						0	0	0
MINERVA TANTOCO TRUSTEE	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN THOGMARTIN TRUSTEE	1 00	X						0	0	0
LISA M THOMAS TRUSTEE	1 00	X						0	0	0
TIMOTHY J TYNAN TRUSTEE	1 00	X						0	0	0
JAMES S WIENER TRUSTEE	3 00	X						0	0	0
MARGARET HONEY PRESIDENT & CEO	35 00			X				367,427	0	62,932
SHIH-CHANG LU CHIEF FINANCIAL OFFICER	35 00			X				199,881	0	22,353
DANNY WEMPA CHIEF OPERATING OFFICER	35 00			X				222,501	0	36,379
KIRYN HOFFMAN CHIEF DEVELOPMENT OFFICER	35 00				X			202,222	0	47,903
KATHERINE MCMILLAN CULP CHIEF LEARNING OFFICER	35 00				X			198,112	0	21,987
ANDRES HENRIQUEZ VP, STEM LEARNING IN COMMUNITIES	35 00				X			165,108	0	65,007

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEPHEN MILES UZZO CHIEF SCIENTIST	35 00				X			152,635	0	48,059
MICHEL HERVE GULICK AVP FOR INSTITUTIONAL DEVELOPMENT	35 00					X		142,149	0	36,914
BETANIA TIBURCIO VP, AUDIENCE AND BUSINESS DEVELOPMENT	35 00					X		134,752	0	37,967
SAMUEL LITT DIRECTOR OF INFORMATION TECHNOLOGY	35 00					X		132,044	0	23,745
PRIYA MOHABIR VP, YOUTH DEVELOPMENT	35 00					X		128,684	0	35,330
SYLVIA PEREZ VP, EDUCATION SERVICES	35 00					X		126,243	0	26,260

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

NEW YORK HALL OF SCIENCE

Employer identification number

11-2104059

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

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) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	15,618,131	18,373,199	16,171,778	10,502,888	14,316,314	74,982,310
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge	551,616	496,031	520,695	575,318	538,221	2,681,881
4	Total. Add lines 1 through 3	16,169,747	18,869,230	16,692,473	11,078,206	14,854,535	77,664,191
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4,603,568
6	Public support. Subtract line 5 from line 4						73,060,623

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	16,169,747	18,869,230	16,692,473	11,078,206	14,854,535	77,664,191
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	653,487	417,726	475,533	695,358	758,652	3,000,756
9	Net income from unrelated business activities, whether or not the business is regularly carried on	300,815	131,350	131,350	162,675	170,200	896,390
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	359,122	591,341	641,789	542,646	410,949	2,545,847
11	Total support. Add lines 7 through 10						84,107,184
12	Gross receipts from related activities, etc (see instructions)					12	16,551,139
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 2018 (line 6, column (f) divided by line 11, column (f))	14 86.870 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 87.840 %
16a	33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒	
b	33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐	
17a	10%-facts-and-circumstances test—2018. 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 organization ▶ ☐	
b	10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	5a	
b Type I or Type II only. 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	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))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section 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? <i>If "No," describe in Part VI 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.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions)		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
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? <i>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.</i>		
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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
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? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
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 exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

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

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME - 2014 AMOUNT \$ 42,550 2015 AMOUNT \$ 54,180 2016 AMOUNT \$ 66,578 2017 AMOUNT \$ 79,144 2018 AMOUNT \$ 79,923 PARKING INCOME - 2014 AMOUNT \$ 130,335 2 015 AMOUNT \$ 364,024 2016 AMOUNT \$ 393,572 2017 AMOUNT \$ 288,186 2018 AMOUNT \$ 165, 378 RESTAURANT/STORE - 2014 AMOUNT \$ 186,237 2015 AMOUNT \$ 173,137 2016 AMOUNT \$ 181 ,639 2017 AMOUNT \$ 175,316 2018 AMOUNT \$ 165,648

SCHEDULE C (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	OMB No 1545-0047 2018 Open to Public Inspection

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

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

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

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

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

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

Name of the organization NEW YORK HALL OF SCIENCE	Employer identification number 11-2104059
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2** Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3** Volunteer hours for political campaign activities (see instructions) _____

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

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ **Yes** ☐ **No**
- 4a** Was a correction made? ☐ **Yes** ☐ **No**
- b** If "Yes," describe in Part IV

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

- 1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3** Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4** Did the filing organization file **Form 1120-POL** for this year? ☐ **Yes** ☐ **No**
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

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

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

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

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

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

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

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

d Other exempt purpose expenditures

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

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

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

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

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

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

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

☐ **Yes** ☐ **No****4-Year Averaging Period Under section 501(h)**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		246,022
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			246,022
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
PART II-B, LINE 1	NEW YORK HALL OF SCIENCE HAS RETAINED COUNSEL TO MONITOR APPROPRIATIONS ACTIVITY AND CONTACT GOVERNMENT OFFICIALS REGARDING SCIENCE FUNDING AND FUNDING FOR NYSCI WITH RESPECT TO THE UNITED STATES, NEW YORK STATE AND NEW YORK CITY GOVERNMENTS. LOBBYING COSTS ARE DISCLOSED ON SCHEDULE C, PART II-B, LINE 1G

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

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

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

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

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

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

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

3

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

a

☒ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☒ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	3,145,386	3,003,701	2,777,951	2,859,884	2,573,854
b Contributions	1,294,853			8,842	103,635
c Net investment earnings, gains, and losses	306,158	281,922	365,665	49,335	329,862
d Grants or scholarships					
e Other expenditures for facilities and programs	472,449	116,804	111,430	111,499	120,257
f Administrative expenses	22,903	23,433	28,485	28,611	27,210
g End of year balance	4,251,045	3,145,386	3,003,701	2,777,951	2,859,884

2

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

a

Board designated or quasi-endowment

78 850 %

b

Permanent endowment

11 970 %

c

Temporarily restricted endowment

9 180 %

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

3a

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

(i) unrelated organizations

Yes

No

(ii) related organizations

Yes

No

b

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

3b

Yes

No

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		90,569,188	48,264,502	42,304,686
c Leasehold improvements				
d Equipment		3,994,249	3,375,595	618,654
e Other		189,347	88,790	100,557
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				43,023,897

Schedule D (Form 990) 2018

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

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

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	186
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	186

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

☒

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	20,782,480
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	316,151
b	Donated services and use of facilities	2b	956,221
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	610,787
e	Add lines 2a through 2d	2e	1,883,159
3	Subtract line 2e from line 1	3	18,899,321
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	43,753
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	43,753
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	18,943,074

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	25,018,379
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	956,221
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	610,787
e	Add lines 2a through 2d	2e	1,567,008
3	Subtract line 2e from line 1	3	23,451,371
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	43,753
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	43,753
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	23,495,124

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

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

Supplemental Information

Return Reference	Explanation
PART III, LINE 1A	CONSISTENT WITH THE POLICY OF MANY MUSEUMS, PURCHASES FOR USE AS EXHIBITS AND PROGRAMS ARE NOT CAPITALIZED

Supplemental Information

Return Reference	Explanation
PART III, LINE 4	NYSCI HAS APPROXIMATELY 450 INTERACTIVE EXHIBITS THAT EXPLORE CHEMISTRY, BIOLOGY, ASTRONOMY, PHYSICS, GENETICS, AND OTHER STEM (SCIENCE, TECHNOLOGY, ENGINEERING AND MATH) TOPICS, ALL GEARED FOR CHILDREN AND ADULTS. THESE EXHIBITS, COMBINED WITH THE OUTDOOR SCIENCE PLAYGROUND, ROCKET PARK MINI GOLF, THE BIOCHEMISTRY, ASTRONOMY AND CONNECTIONS DISCOVERY LABS, THE PRESCHOOL PLACE FOR EARLY CHILDHOOD LEARNING, THE HARCOURT TEACHER LEADERSHIP CENTER FOR ENHANCED TEACHER TRAINING PROGRAMS, AND NATIONALLY REPLICATED SCIENCE EDUCATION PROGRAMS FOR UNDERSERVED POPULATIONS, OFFER A HIGH-TECH HANDS-ON LABORATORY OF DISCOVERY FOR VISITORS OF ALL AGES. THE EXHIBITS SERVE A CRITICAL ROLE IN REALIZING NYSCI'S MISSION TO BRING THE EXCITEMENT AND UNDERSTANDING OF SCIENCE AND TECHNOLOGY TO CHILDREN, FAMILIES, TEACHERS AND OTHERS BY OFFERING CREATIVE AND PARTICIPATORY WAYS TO LEARN ABOUT STEM TOPICS.

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	NYSCI MAINTAINS VARIOUS DONOR RESTRICTED FUNDS WHOSE PURPOSE IS TO PROVIDE LONG-TERM SUPPO RT FOR ITS PROGRAMS IN EXHIBITIONS, EDUCATION, PUBLIC PROGRAMS AND SPECIAL PROJECTS

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	NYSCI RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY WHEN THEY ARE MORE LIKELY THAN NOT OF BEING SUSTAINED MANAGEMENT HAS DETERMINED THAT NYSCI HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE NYSCI IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO FISCAL 2016

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES REPORTED ON PART VIII LINE 6B 282,426 DIRECT EXPENSE FOR FUNDRAISING GALA REPORTED ON PART VIII LINE 8B 328,361

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES REPORTED ON PART VIII LINE 6B 282,426 DIRECT EXPENSE FOR FUNDRAISING GALA REPORTED ON PART VIII LINE 8B 328,361

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

		(a) Event #1	(b) Event #2	(c) Other events	(d)
		ANNUAL GALA (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	1,742,355			1,742,355
	2 Less Contributions	1,243,794			1,243,794
	3 Gross income (line 1 minus line 2)	498,561			498,561
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	213,823			213,823
	7 Food and beverages	437			437
	8 Entertainment	71,350			71,350
	9 Other direct expenses	42,751			42,751
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				328,361
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				170,200

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

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

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

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

b If "No," explain _____

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

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers?	☐ Yes ☐ No				
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes ☐ No				
13 Indicate the percentage of gaming activity conducted in					
a The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 100px; text-align: center;">13a</td><td style="width: 100px; text-align: center;">%</td></tr><tr><td style="text-align: center;">13b</td><td style="text-align: center;">%</td></tr></table>	13a	%	13b	%
13a	%				
13b	%				
b An outside facility					

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

Name ►

Address ►

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

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

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

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions

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

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

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference

Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 7

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

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	THE SUBCONTRACTOR IS REQUIRED TO SUBMIT A BUDGET FOR APPROVAL. ONCE APPROVED, NYSCI MAINTAINS THE BUDGET IN ITS ACCOUNTING SYSTEM AND MONITORS GRANT EXPENSES AGAINST THIS BUDGET. PAYMENT TO THE SUBCONTRACTOR IS USUALLY IN THE FORM OF REIMBURSEMENTS. SUBCONTRACTOR IS REQUIRED TO SUBMIT RECEIPTS AND SUPPORTING DOCUMENTATION IN ORDER TO BE REIMBURSED. DEPENDING ON THE PROJECT, INTERIM PROGRESS REPORTS MAY BE REQUIRED. A FINAL REPORT AND ACCOUNTING STATEMENT IS USUALLY REQUIRED AT THE END OF THE PROJECT. AT ITS DISCRETION, NYSCI RESERVES THE RIGHT TO AUDIT THE SUBCONTRACTOR'S FINANCIAL RECORDS.
FORM 990, SCHEDULE I, PART II, LINE 1, COL (H) GRANT PURPOSE	THE PURPOSE OF GRANT ASSISTANCE TO DOMESTIC ORGANIZATIONS IS AS FOLLOWS: 1. THE TECH MUSEUM OF INNOVATION: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES. 2. AMERICAN INSTITUTE FOR RESEARCH IN THE BEHAVIORAL SCIENCES: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL GRANT FOCUSING ON EDUCATION INNOVATION AND RESEARCH. 3. NEW YORK STATE ASSOCIATION FOR COMPUTERS AND TECHNOLOGY IN EDUCATION: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL GRANT FOCUSING ON EDUCATION INNOVATION AND RESEARCH. 4. CHILDREN'S MUSEUM OF NORTHWEST ARKANSAS: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES. 5. NEW YORK ACADEMY OF SCIENCES: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A GRANT FOCUSING ON EDUCATION. 6. REGENTS OF THE UNIVERSITY OF MICHIGAN: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON HEALTH AND HUMAN SERVICES. 7. INDIANA UNIVERSITY: PAYMENT FOR SERVICES RENDERED IN CONNECTION WITH A FEDERAL RESEARCH GRANT FOCUSING ON EDUCATION AND HUMAN RESOURCES.

Additional Data

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE TECH MUSEUM OF INNOVATION 201 S MARKET STREET SAN JOSE, CA 95113	94-2864660	501(C)(3)	64,410				SEE PART IV
AMERICAN INSTITUTE FOR RESEARCH IN THE BEHAVIORAL SCIENCES 1000 THOMAS JEFFERSON STREET - NW WASHINGTON, DC 20007	25-0965219	501(C)(3)	52,228				SEE PART IV

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK STATE ASSOCIATION FOR COMPUTERS AND TECHNOLOGY IN EDUCATION 8 AIRPORT PARK BOULEVARD LATHAM, NY 12110	22-2910215	501(C)(3)	30,763				SEE PART IV
CHILDREN'S MUSEUM OF NORTHWEST ARKANSAS 1009 MUSEUM WAY BENTONVILLE, AR 72712	20-4718511	501(C)(3)	13,131				SEE PART IV

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK ACADEMY OF SCIENCES 7 WORLD TRADE CENTER NEW YORK, NY 10007	13-1773640	501(C)(3)	10,000				SEE PART IV
REGENTS OF THE UNIVERSITY OF MICHIGAN 5082 WOLVERINE TOWER 3003 S STATE STREET ANN ARBOR, MI 48109	38-6006309	501(C)(3)	7,090				SEE PART IV

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIANA UNIVERSITY 509 E 3RD STREET BLOOMINGTON, IN 47401	35-6001673	501(C)(3)	5,066				SEE PART IV

Schedule J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.		OMB No 1545-0047
			2018
			Open to Public Inspection
Name of the organization NEW YORK HALL OF SCIENCE		Employer identification number 11-2104059	

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account	☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations	☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
a Receive a severance payment or change-of-control payment?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III		7	Yes
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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

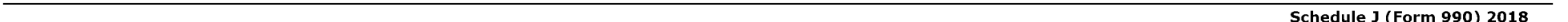
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

See Additional Data Table**Schedule J (Form 990) 2018**

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 7	THE FOLLOWING EMPLOYEES RECEIVED PERFORMANCE BONUSES AS REPORTED ON PART II, COLUMN B(II) MARGARET A HONEY, PRESIDENT & CEO - \$40,625 SAMUEL LITT, DIRECTOR OF INFORMATION TECHNOLOGY - \$3,000 PRIYA MOHABIR, VP, YOUTH DEVELOPMENT - \$2,000 SYLVIA PEREZ, VP, EDUCATION SERVICES - \$2,000



Additional Data

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

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MARGARET HONEY PRESIDENT & CEO	(i)	311,624	40,625	15,178	36,075	26,857	430,359	0
	(ii)	0	0	0	0	0	0	0
SHIH-CHANG LU CHIEF FINANCIAL OFFICER	(i)	198,611	0	1,270	22,200	153	222,234	0
	(ii)	0	0	0	0	0	0	0
DANNY WEMPA CHIEF OPERATING OFFICER	(i)	222,039	0	462	24,975	11,404	258,880	0
	(ii)	0	0	0	0	0	0	0
KIRYN HOFFMAN CHIEF DEVELOPMENT OFFICER	(i)	202,052	0	170	22,984	24,919	250,125	0
	(ii)	0	0	0	0	0	0	0
KATHERINE MCMILLAN CULP CHIEF LEARNING OFFICER	(i)	196,707	0	1,405	21,834	153	220,099	0
	(ii)	0	0	0	0	0	0	0
ANDRES HENRIQUEZ VP, STEM LEARNING IN COMMUNITIES	(i)	164,404	0	704	20,685	44,322	230,115	0
	(ii)	0	0	0	0	0	0	0
STEPHEN MILES UZZO CHIEF SCIENTIST	(i)	150,571	0	2,064	17,238	30,821	200,694	0
	(ii)	0	0	0	0	0	0	0
MICHEL HERVE GULICK AVP FOR INSTITUTIONAL DEVELOPMENT	(i)	142,035	0	114	13,875	23,039	179,063	0
	(ii)	0	0	0	0	0	0	0
BETANIA TIBURCIO VP, AUDIENCE AND BUSINESS DEVELOPMEN	(i)	134,360	0	392	15,540	22,427	172,719	0
	(ii)	0	0	0	0	0	0	0
SAMUEL LITT DIRECTOR OF INFORMATION TECHNOLOGY	(i)	127,825	3,000	1,219	14,365	9,380	155,789	0
	(ii)	0	0	0	0	0	0	0
PRIYA MOHABIR VP, YOUTH DEVELOPMENT	(i)	126,470	2,000	214	14,601	20,729	164,014	0
	(ii)	0	0	0	0	0	0	0
SYLVIA PEREZ VP, EDUCATION SERVICES	(i)	123,886	2,000	357	14,601	11,659	152,503	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number
11-2104059

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	6	140,843	AVG SELLING PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (EQUIP/PROP)	X	1	920,557	COST
26 Other ► (FLIGHT VOUCHERS)	X	1	4,025	COST
27 Other ► ()				
28 Other ► ()				

29

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

29

0

30a

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

Yes

No

30a

No

b If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

Yes

31

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

No

32a

No

b If "Yes," describe in Part II

33

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

Part II **Supplemental Information.**

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

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

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Name of the organization
NEW YORK HALL OF SCIENCE

Employer identification number

11-2104059

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 1	THE NEW YORK HALL OF SCIENCE (NYSCI) IS NEW YORK CITY'S PREMIER INTERACTIVE MUSEUM OF SCIENCE AND TECHNOLOGY, AS WELL AS A GLOBAL LEADER IN STEM EDUCATION AND A LABORATORY FOR NEW FORMS OF LEARNING. FOUNDED DURING THE 1964-1965 WORLD'S FAIR, NYSCI IS RECOGNIZED FOR GROUNDBREAKING EXHIBITIONS, INNOVATIVE EDUCATIONAL PROGRAMS, YOUTH DEVELOPMENT AND MENTORSHIP, TEACHER PROFESSIONAL DEVELOPMENT INITIATIVES, AND LARGE-SCALE EVENTS THAT DRAW CHILDREN AND ADULTS INTO HANDS-ON STEM LEARNING. OUR MISSION IS TO NURTURE GENERATIONS OF PASSIONATE LEARNERS, CRITICAL THINKERS, AND ACTIVE CITIZENS THROUGH DESIGN, MAKE, PLAY, A NOVEL APPROACH TO LEARNING AND ENGAGEMENT THAT DRAWS UPON RESEARCH ON DEEPER LEARNING AND SUPPORTS THE CREATION OF LEARNING EXPERIENCES THAT DEVELOP CRITICAL THINKING, KNOWLEDGE INTEGRATION, CREATIVITY, AND INNOVATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	-BOARD OF TRUSTEE MEMBERS ALAN SINSHEIMER AND SETH DUBIN HAVE A FAMILY RELATIONSHIP -BOARD OF TRUSTEE MEMBERS LINDA SANFORD AND MARY KELLY HAVE A BUSINESS RELATIONSHIP -BOARD OF TRUSTEE MEMBERS ARVIND KRISHNA AND LINDA SANFORD HAVE A BUSINESS RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CHIEF FINANCIAL OFFICER ENGAGES AN EXTERNAL ACCOUNTING FIRM TO PREPARE THE FORM 990 AND REVIEWS IT WITH THE CHIEF EXECUTIVE OFFICER. THE FORM 990 IS THEN PROVIDED TO EACH VOTING BOARD MEMBER ELECTRONICALLY VIA EMAIL BEFORE FILING. THE CHIEF FINANCIAL OFFICER IN CONJUNCTION WITH THE CHIEF EXECUTIVE OFFICER, RESPONDS TO ANY COMMENTS AND QUESTIONS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	NYSCI'S TRANSPARENCY POLICY INTRODUCTION THE INTERNAL REVENUE CODE IMPOSES PENALTY TAXES I F NYSCI WERE TO ENTER INTO AN EXCESS BENEFIT TRANSACTION WITH A TRUSTEE OR OFFICER OF NYSCI OR WITH ANYONE ELSE WHO, DURING THE PRIOR FIVE YEARS, HAS BEEN IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF NYSCI A SIMILAR CONCERN ABOUT CONFLICTS OF INT EREST ALSO INFORMS THE NEW YORK NOT-FOR-PROFIT LAW PROVISIONS ABOUT CONTRACTS INVOLVING NO T-FOR-PROFIT ORGANIZATIONS AND THEIR TRUSTEES AND OFFICERS NYSCI HAS ALWAYS BEEN CAREFUL TO AVOID CONFLICTS ISSUES NEVERTHELESS, IT IS APPROPRIATE TO SET OUT NYSCI'S POLICY IN A WRITTEN STATEMENT WHICH DRAWS FROM THE REQUIREMENTS OF FEDERAL AND STATE LAW AND ALSO FROM OTHER PRINCIPLES OF GOOD MANAGEMENT DEFINITIONS A PERSON WHO HAS "SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF NYSCI" MEANS EACH TRUSTEE AND EACH SENIOR OFFICER OF NYSCI INCLUDING ALL NYSCI EMPLOYEES WHO ARE AT THE LEVEL OF DIRECTOR OR ABOVE FOR OUR PURPOSES, IT ALSO M EANS A CORPORATION IN WHICH A TRUSTEE OR A SENIOR OFFICER IS A DIRECTOR OR OFFICER OR CONT ROLS AT LEAST 10% OF THE VOTING POWER AND A PARTNERSHIP IN WHICH A TRUSTEE OR A SENIOR OFF ICER IS ENTITLED TO AT LEAST 10% OF THE PROFITS WE CALL EACH OF THOSE PEOPLE AND ENTITIES AN "INFLUENTIAL PERSON " THAT ALSO INCLUDES AN INDIVIDUAL'S SPOUSE OR SIGNIFICANT OTHER, PARENTS, CHILDREN AND THEIR SPOUSES, SISTERS AND BROTHERS, AND SISTERS- AND BROTHERS-IN-LA W AN EXCESS BENEFIT TRANSACTION IS A TRANSACTION IN WHICH NYSCI PROVIDES TO AN INFLUENTIA L PERSON AN ECONOMIC BENEFIT THAT IS WORTH MORE THAN THE GOODS OR SERVICES THAT NYSCI RECE IVES IN RETURN THE "REVIEWER" IS THE COMMITTEE DESIGNATED BY THE CHAIRMAN TO REVIEW TRANS ACTIONS THAT REQUIRE AUTHORIZATION UNDER THIS POLICY STATEMENT REVIEW WITHOUT FIRST RECE IVING AUTHORIZATION FROM THE REVIEWER A) NYSCI MAY NOT DO BUSINESS WITH AN INFLUENTIAL PE RSON, B) NO INFLUENTIAL PERSON MAY ACCEPT A GIFT OR LOAN (OTHER THAN A LOAN IN THE NORMAL COURSE OF THE LENDER'S BUSINESS) FROM A CONTRACTOR OR VENDOR OF NYSCI AND THAT HAS A VALUE OF MORE THAN \$100, C) NYSCI MAY NOT MAKE A CONTRIBUTION TO ANY CHARITY OF WHICH AN INFLUE NTIAL PERSON IS A DIRECTOR OR OFFICER, AND D) NO INFLUENTIAL PERSON MAY GIVE OR LOAN TO AN EMPLOYEE OF NYSCI, NOR MAY AN EMPLOYEE OF NYSCI GIVE OR LOAN TO AN INFLUENTIAL PERSON, MO RE THAN \$1,000 THE REVIEWER MAY DECLINE TO GRANT AUTHORIZATION FOR A TRANSACTION UNDER (A) ONLY IF THE REVIEWER DETERMINES THAT THE PROPOSED TRANSACTION WOULD BE AN EXCESS BENEFIT TRANSACTION THE REVIEWER MAY DECLINE TO GRANT AUTHORIZATION FOR A TRANSACTION UNDER (B), (C), OR (D) ONLY IF THE REVIEWER DETERMINES THAT THE PROPOSED TRANSACTION WOULD BE INIMIC AL, OR MAY BE SEEN TO BE INIMICAL, TO RESPONSIBLE MANAGEMENT OF NYSCI LARGE CONTRACTS BE FORE NYSCI ENTERS INTO ANY AGREEMENT FOR MORE THAN 2 5% OF NYSCI'S OPERATING BUDGET, IT SH ALL NOTIFY THE REVIEWER OF THE NATURE OF THE AGREEMENT AND THE NAME OF THE OTHER PARTY AND FURNISH WHATEVER INFORMATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	IT HAS IN ITS POSSESSION ABOUT THE OWNERSHIP AND CONTROL OF THE OTHER PARTY THE REVIEWER SHALL BE DEEMED TO HAVE AUTHORIZED NYSCI TO ENTER INTO THE AGREEMENT UNLESS IT NOTIFIES NY SCI WITHIN SEVEN DAYS THAT THE AGREEMENT CONTEMPLATES A TRANSACTION THAT, BY REASONS OF THE IDENTITY OF THE PARTIES, REQUIRES FURTHER REVIEW UNDER THIS POLICY STATEMENT NOTIFICATION EACH INFLUENTIAL PERSON MUST NOTIFY THE REVIEWER UPON BECOMING AWARE THAT NYSCI IS DOING BUSINESS, OR IS CONSIDERING DOING BUSINESS, WITH THAT INFLUENTIAL PERSON IN ADDITION, ONCE EACH YEAR AT A TIME DESIGNATED BY THE CHAIRMAN, EACH INFLUENTIAL PERSON SHALL SUBMIT TO THE REVIEWER A COMPLETED QUESTIONNAIRE IN THE FORM ATTACHED TO THIS POLICY STATEMENT REPETITIVE BUSINESS IN THE EVENT THAT AN INFLUENTIAL PERSON AND NYSCI EXPECT TO ENGAGE IN REPETITIVE BUSINESS, THE REVIEWER MAY PROSPECTIVELY AUTHORIZE THE CONDUCT OF THAT BUSINESS ON TERMS THAT THE REVIEWER CONSIDERS APPROPRIATE NO FURTHER AUTHORIZATION FOR THAT REPETITIVE BUSINESS SHALL BE REQUIRED SO LONG AS THE INFLUENTIAL PERSON AND NYSCI COMPLY WITH THE TERMS SET BY THE REVIEWER THE REVIEWER MAY REVOKE A PROSPECTIVE AUTHORIZATION AT ANY TIME RECONSIDERATION IF THE REVIEWER DECLINES TO AUTHORIZE ANY TRANSACTION THAT REQUIRES AUTHORIZATION UNDER THIS POLICY STATEMENT, ANY PARTY TO THAT TRANSACTION MAY SUBMIT THE MATTER TO THE BOARD OF TRUSTEES OR THE EXECUTIVE COMMITTEE OF THE BOARD FOR RECONSIDERATION THE RELEVANT INFLUENTIAL PERSON MAY NOT VOTE ON THAT MATTER AS A TRUSTEE OR MEMBER OF THE EXECUTIVE COMMITTEE DOCUMENTATION ANNUALLY, THE FINANCE AND AUDIT COMMITTEE PRESENTS TO THE BOARD ANY SIGNIFICANT POTENTIAL CONFLICTS, OR LACK THEREOF, ENCOUNTERED DURING THE YEAR THE PRESENTATION IS RECORDED IN THE MINUTES OF THE BOARD MEETING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE CEO IS REVIEWED AND APPROVED BY THE BOARD OF TRUSTEES, PROVIDED THAT PERSONS WITH POTENTIAL CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENTS DO NOT PARTICIPATE. THE BOARD USES APPROPRIATE AND ADEQUATE DATA TO DETERMINE THE REASONABLENESS OF THE COMPENSATION BEING CONSIDERED AGAINST INDUSTRY STANDARDS. THE BOARD DISCUSSES THE COMPENSATION PACKAGE IN EXECUTIVE SESSION AT THE APPROPRIATE QUARTERLY BOARD MEETING, FOLLOWED BY A CLOSED DOOR DISCUSSION WITH THE CEO. THE BOARD'S APPROVAL OF CHANGES TO THE CEO'S COMPENSATION, ALONG WITH ANY ASSOCIATED PERFORMANCE GOALS, ARE CAPTURED IN A FORMAL SIGNED AGREEMENT BETWEEN THE BOARD AND THE CEO. FOR KEY EMPLOYEES, THE CEO USES INDUSTRY STANDARDS SUBSTANTIATED BY APPROPRIATE DATA SUCH AS COMPENSATION SURVEYS, PERFORMANCE REVIEWS, AND A CONSIDERATION OF EQUITY AND PARITY WITHIN THE ORGANIZATION. WRITTEN AND SIGNED PERFORMANCE REVIEWS, WHICH INCLUDE FUTURE GOALS, ARE PREPARED AND DISCUSSED BETWEEN EACH KEY EMPLOYEE AND THE CEO. CHANGES TO A KEY EMPLOYEE'S COMPENSATION IS DOCUMENTED IN A WRITTEN MEMO FROM THE CEO TO THE KEY EMPLOYEE. THE COMPENSATION REVIEW PROCESS WAS LAST CONDUCTED IN 2017.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST HARD COPIES ARE PROVIDED WITH A CHARGE TO THE RECIPIENT FOR POSTAGE ELECTRONIC COPIES IN PDF FORMAT ARE PROVIDED FOR FREE

990 Schedule O, Supplemental Information

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