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.

OMB No. 1545-0047 Open to Public

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for instruction

A For the 2022 calendar year, or tax year beginning

SEP 1, 2022 Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

A 5	Al C	2022 calendar year, or tax year beginning SEP 1, 2022 and ending	AUG 31, 2023	
A	or the 2		AUG 31, 2023	<u></u>
В	Check if applicable:	C Name of organization	D Employer identif	ication number
c	яррисаоте.			
	Address change	NEW YORK SHAKESPEARE FESTIVAL	l'	
	Name		12 10440	F 2
<u></u>	change	Doing business as THE PUBLIC THEATER; JOE'S PUB	13-18448	52
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/su	uite E Telephone numbe	er
	Final ,	425 LAFAYETTE STREET	(212)539	
-	return/ termin-			67,276,806.
	ated Amended	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	67,276,806.
	return	NEW TORK, NI TOOUS	H(a) Is this a group r	eturn
	Applica-	F Name and address of principal officer: PATRICK WILLINGHAM	for subordinates	? Yes X No
	pending	SAME AS C ABOVE	H(b) Are all subordinates i	
10.0				
\perp	ax-exen		527 If "No," attach a	list. See instructions
J	Nebsite:	WWW.PUBLICTHEATER.ORG	H(c) Group exemption	n number
K	orm of a	rganization: X Corporation Trust Association Other L Y		N State of legal domicile; NY
		Summary	out of formations	. Otato of is all ostillone, 2.1
1 6				
a	1 Br	riefly describe the organization's mission or most significant activities: SEE SCHE	DULE O	
nc				
Па	2 0	heck this box if the organization discontinued its operations or disposed of m	ore than 25% of its not a	seats
Governance	10,000			45
ó	11.104 %		3	
No.	4 No	umber of independent voting members of the governing body (Part VI, line 1b)	4	4.3
S		otal number of individuals employed in calendar year 2022 (Part V, line 2a)		1374
tie				41
:≦	11000	otal number of volunteers (estimate if necessary)		
Activities &	7 a To	otal unrelated business revenue from Part VIII, column (C), line 12	7a	5,368.
_	b Ne	et unrelated business taxable income from Form 990-T, Part I, line 11	7b	3,931.
			Prior Year	Current Year
	D 0.	Avibutions and grants (Dart VIII line 1b)	43,288,819.	29,187,998.
Revenue		ontributions and grants (Part VIII, line 1h)		
en	9 Pr	ogram service revenue (Part VIII, line 2g)	8,492,625.	7,285,169.
e S	10 In	vestment income (Part VIII, column (A), lines 3, 4, and 7d)	967,212.	1,318,401.
\mathbf{x}		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,795,340.	12,617,884.
			70,543,996.	50,409,452.
_		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
	13 Gr	rants and similar amounts paid (Part IX, column (A), lines 1-3)	486,359.	568,377.
	14 Be	enefits paid to or for members (Part IX, column (A), line 4)	0.	0.
"		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	36,506,887.	36,722,767.
Expenses			747,769.	998,817.
en.		rofessional fundraising fees (Part IX, column (A), line 11e)	/4/,/09.	990,017.
ğ	Б То	otal fundraising expenses (Part IX, column (D), line 25) 7,467,987.		
ш	17 01	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	25,674,188.	23,405,141.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	63,415,203.	61,695,102.
			7,128,793.	-11,285,650.
	19 Re	evenue less expenses. Subtract line 18 from line 12		
Net Assets or Fund Balances			Beginning of Current Year	End of Year
ets	20 To	otal assets (Part X, line 16)	136,486,072.	147,706,234.
SS	24 T		11,324,703.	30,595,941.
at Du	21 To	otal liabilities (Part X, line 26)		
Z.	22 Ne	et assets or fund balances. Subtract line 21 from line 20	125,161,369.	117,110,293.
Pa	art II	Signature Block		
Und	er nenaltie	es of perjury, I declare that I have examined this return, including accompanying schedules and stat	tements, and to the best of m	v knowledge and belief, it is
		and complete. Declaration of frefare (other than officer) is based on all information of which prepa		,
true	, correct, i	and eon present that officer is based on all information of which prepare		
		The comments of the contract o	6/29/24	
Sig	n 5	Signature of officer	Date	
Her		URRAY ABELES, CHIEF FINANCIAL OFFICER		
пег		ype or print name and title		
_		*In-	I Poto 3	II DEB
	I D	Print/Type preparer's name Preparer's signature	Date Check	PTIN
	I P	110-110-110-110-110-110-110-110-110-110		b 0 0 0 0 4 0 F 0
Paid		ICHAEL WALLACE	6 23 24 Self-emolov	P00881958
	M t	ICHAEL WALLACE Michael Wallace	SELL-SHIDINA	33
Prej	d M parer F	ICHAEL WALLACE irm's name LUTZ AND CARR, CPAS LLP	6 23 24 self-employ Firm's EIN 1	00
Prej	d M parer F	ICHAEL WALLACE irm's name LUTZ AND CARR, CPAS LLP irm's address 551 FIFTH AVENUE, SUITE 400	Firm's EIN 1	3-1655065
Prej	d M parer F	ICHAEL WALLACE irm's name LUTZ AND CARR, CPAS LLP	Firm's EIN 1	33

FOUNDED IN 1998, JOE'S PUB IS COMMITTED TO REFLECTING THE DIVERSE
COMMUNITY THAT IT REPRESENTS IN ITS AUDIENCES AND ON ITS STAGE BY
PROGRAMMING A WIDE RANGE OF EXCEPTIONAL PERFORMANCES FROM ARTISTS
ACROSS THE FIELDS OF MUSIC, FILM, AND DANCE, WHILE KEEPING TICKET
PRICES AT A MINIMUM. IN AN AVERAGE SEASON, JOE'S PUB PRESENTS
APPROXIMATELY 700 SHOWS FOR OVER 100,000 AUDIENCE MEMBERS. SINCE ITS
OPENING, JOE'S PUB HAS PRESENTED OVER 8,000 PERFORMANCES FROM AN
ECLECTIC ROSTER THAT INCLUDES TOP PERFORMERS FROM BROADWAY, CABARET,
DANCE, WORLD, SINGER-SONGWRITER, JAZZ, COUNTRY AND INDIE GENRES,
TODAY'S RISING STARS, AND GRAMMY AWARD-WINNERS.

4d Other program services (Describe on Schedule O.)

(Expenses \$ 9,396,907 • including grants of \$ 568,377 •) (Revenue \$ 349,408 •)

le Total program service expenses 47,517,052.

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	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			3,7
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		37	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
J	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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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		X
С	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		X
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	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			3,7
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		Х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Λ	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
b	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		X
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	110		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
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		Х
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	X	
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	Х	
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		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
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	Х	

Form 990 (2022) NEW YORK SHAKESPEA Part IV | Checklist of Required Schedules (continued)

	Cite and a stream of continued		1	T					
00	Did the association was at several than \$5,000 of several and the several transfer described in this includes		Yes	No					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	20	x						
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22							
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete								
		23	х						
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the								
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete								
	Schedule K. If "No," go to line 25a	24a		х					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease								
	any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit								
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and								
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete								
	Schedule L, Part I	25b		X					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current								
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l					
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х					
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,								
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	l		7.7					
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X					
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,								
	instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		x					
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X					
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200							
·	"Yes," complete Schedule L, Part IV	28c		х					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	 					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation								
	contributions? If "Yes," complete Schedule M	30		Х					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete								
	Schedule N, Part II	32		Х					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations								
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and								
	Part V, line 1	34	X						
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х						
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity								
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X						
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?								
	If "Yes," complete Schedule R, Part V, line 2	36		X					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		X					
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI								
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	X						
Pai	Note: All Form 990 filers are required to complete Schedule O	<u> </u>							
	Check if Schedule O contains a response or note to any line in this Part V								
	Shook if Contours Contains a response of flote to any line in this fact v		Yes	No					
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 547		1.03	110					
b		_							
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c	Х						

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No							
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	1									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X								
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X								
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		X							
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).	_		v							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		Λ							
_	, , , , , , , , , , , , , , , , , , , ,										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60		X							
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		25							
D	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).	OD									
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	Х								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X								
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10									
	to file Form 8282?	7c		х							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
h											
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?										
9 Sponsoring organizations maintaining donor advised funds.											
а	a Did the sponsoring organization make any taxable distributions under section 4966?										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12										
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities										
11	Section 501(c)(12) organizations. Enter:										
a	Gross income from members or shareholders 11a										
D	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)										
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note: See the instructions for additional information the organization must report on Schedule O.										
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										
С	Enter the amount of reserves on hand										
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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?	15		X							
	If "Yes," see the instructions and file Form 4720, Schedule N.										
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X							
	If "Yes," complete Form 4720, Schedule O.										
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities										
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17									
	If "Yes," complete Form 6069.										

232005 12-13-22

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

	Check if Schedule O contains a response or note to any line in this Part VI				X								
Sec	tion A. Governing Body and Management												
				Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	45										
	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 on Schedule O.												
b	Enter the number of voting members included on line 1a, above, who are independent	1b	43										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other											
	officer, director, trustee, or key employee?		2		Х								
3	Did the organization delegate control over management duties customarily performed by or under the												
Ū	of officers, directors, trustees, or key employees to a management company or other person?		3		X								
4	Did the organization make any significant changes to its governing documents since the prior Form 9				X								
5	Did the organization become aware during the year of a significant diversion of the organization's ass				X								
_	6 Did the organization have members or stockholders?												
	Did the organization have members, stockholders, or other persons who had the power to elect or ap		6		Х								
1 a			7a		x								
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, s		1a		1								
D			71.		x								
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year		7b		125								
8			0-	Х									
	The governing body?		8a	77	-								
b	Each committee with authority to act on behalf of the governing body?		8b	+ <u>^</u>	-								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real				x								
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		ΙΛ.								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)		٦,,	T								
				Yes	No X								
	Did the organization have local chapters, branches, or affiliates?		10	1	<u> </u>								
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch												
	and branches to ensure their operations are consistent with the organization's exempt purposes?				37								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before filing the forr	n? 11 a	3	X								
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			١									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13												
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		121	, X									
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye												
	on Schedule O how this was done		120										
13	Did the organization have a written whistleblower policy?		13										
14	Did the organization have a written document retention and destruction policy?		14	X									
15	Did the process for determining compensation of the following persons include a review and approva	al by independent											
	$persons, comparability\ data, and\ contemporaneous\ substantiation\ of\ the\ deliberation\ and\ decision?$												
а	The organization's CEO, Executive Director, or top management official		15										
	Other officers or key employees of the organization			, X									
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.												
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	nent with a											
	taxable entity during the year?		16	3	X								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	te its participation											
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization's											
	exempt status with respect to such arrangements?		161	,									
Sec	tion C. Disclosure		•	•									
17	List the states with which a copy of this Form 990 is required to be filed NY, NJ, PA, CA, G	A,FL,IL,MA,	MI,M	N,RI	, VA								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar												
	for public inspection. Indicate how you made these available. Check all that apply.	,		· · · · · · · · · · · · · · · · · · ·									
		on Schedule O)											
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	,	v. and fin	ancial									
	statements available to the public during the tax year.		,, and iii										
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and records											
	MARK ROWAN - 212-539-8500	55 G.1G 1000100											
	425 LAFAYETTE STREET, NEW YORK, NY 10003												
	SEE SCHEDIILE O FOR FILL LIST OF STATES		Го	m QQN	(2022)								

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and 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. See the instructions for the order in which to list the persons above.

Name	(A)	(B)	l		(()		nout	(D)	(E)	(F)
Vector Vice Chair Vice Vice Chair Vice Chair Vice	Name and title	1	(do	not c	heck	more	than	one	I	l '	
Comparizations Comp		•							•	•	
Comparizations Comp		1 '	rector								•
1) LUIS MIRANDA, JR. 7.00			e or di	tee			sated			,	
1) LUIS MIRANDA, JR. 7.00		1	truste	al trus		yee	ubeu			1000 NEO)	_
1) LUIS MIRANDA, JR. 7.00		below	vidual	tution	er	emplo	nest co loyee	le.	,		organizations
CHAIR			ib	Insti	0#ic	Key	High	윤			
The control of the	•	7.00	,,		,,				_	_	0
VICE CHAIR		7 00	X		X				0.	0.	0.
(3) KENNY LEON		7.00	Į.,		\ _V				_	_	0
VICE CHAIR		7 00	Δ.		Δ.				0.	0.	0.
(4) MYCHAL HARRISON		7.00	v		_v				_	_	0
X		7 00	^		^				0.	0.	0.
SECRETARY		7.00	v		v				n	n	n
X		7.00	<u> </u>						0.	0.	<u> </u>
Column	·	7.00	x		x				0.	0.	0.
BOARD MEMBER		1.00									
Column			x						0.	0.	0.
Name	(7) ANDREA E. BERNSTEIN	2.00									
Name	BOARD MEMBER		Х						0.	0.	0.
SACH BUCHWALD SACH BUCHWAL	(8) JASON BLUM	1.00									
BOARD MEMBER	BOARD MEMBER		Х						0.	0.	0.
1.00 MARY SCHMIDT CAMPBELL 1.00 BOARD MEMBER	(9) ZACH BUCHWALD	2.00									
BOARD MEMBER	BOARD MEMBER		Х						0.	0.	0.
1.00 BOARD MEMBER	(10) MARY SCHMIDT CAMPBELL	1.00									
BOARD MEMBER X	BOARD MEMBER		Х						0.	0.	0.
Column	(11) LEE DANIELS	1.00								_	
BOARD MEMBER X			X						0.	0.	0.
1.00 Name		2.00							_	_	0
BOARD MEMBER X 0. 0. 0. (14) ERIC ELLENBOGEN 1.00 0. 0. 0. 0. BOARD MEMBER X 0.		1 00	X						0.	0.	0.
Column		1.00	\ \						_	_	0
BOARD MEMBER X 0. 0. 0. (15) HILARY C. FESHBACK 1.00 0. 0. 0. BOARD MEMBER X 0. 0. 0. (16) FAITH GAY 1.00 0. 0. 0. BOARD MEMBER X 0. 0. 0. (17) DANAI GURIRA 1.00 0. 0. 0.		1 00	A						0.	0.	0.
(15) HILARY C. FESHBACK		1.00	v						_	_	0
BOARD MEMBER X 0. 0. 0. 0.		1 00	^						0.	0.	0.
(16) FAITH GAY BOARD MEMBER X 0. 0. 0. (17) DANAI GURIRA 1.00		1.00	v						0.	0.	0
BOARD MEMBER X 0. 0. 0. (17) DANAI GURIRA 1.00 .		1.00							•	0.	<u> </u>
(17) DANAI GURIRA 1.00		1.00	x						0.	0.	0.
		1.00	貰				\vdash	\vdash			
BOARD MEMBER $ X X U \cdot U \cdot U \cdot U \cdot U \cdot $	BOARD MEMBER		х						0.	0.	0.

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Page 8

Part VII Section A. Officers, Directors	, Trustees, Key Em								es (continued)	OJZ Fage O
(A)	(B)			(()			(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)					Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) ANNE HATHAWAY	1.00									
BOARD MEMBER	1 00	Х						0.	0.	0.
(19) MAXINE ISAACS BOARD MEMBER	1.00	x						0.	0.	0.
(20) ASHLEY LEEDS	1.00	 								
BOARD MEMBER		Х						0.	0.	0.
(22) JAYNE LIPMAN	4.00									
BOARD MEMBER		Х						0.	0.	0.
(23) HANS MORRIS BOARD MEMBER	1.00	х						0.	0.	0.
(24) JAMES MURDOCH	1.00	 						•	•	
BOARD MEMBER		x						0.	0.	0.
(25) GAIL MERRIFIELD PAPP	1.00									
BOARD MEMBER		Х						0.	0.	0.
(26) JULIA PERSHAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(27) JULIO PETERSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
1b Subtotal								0. 3,738,101.	0.	0.
c Total from continuation sheets to F	c Total from continuation sheets to Part VII, Section A									617,755.
d Total (add lines 1b and 1c)								3,738,101.	0.	617,755.

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

42 s No

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

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
YORKE CONSTRUCTION CORPORATION	CONSTRUCTION	
320 WEST 13TH STREET, NEW YORK, NY 10001	MANAGEMENT AND SERVI	10,247,688.
AROL MANAGEMENT LLC, 444 EAST 75TH STREET,	CONSTRUCTION	
5H, NEW YORK, NY 10021	MANAGEMENT AND SERVI	2,352,711.
ENNEAD ARCHITECTS LLP	ARCHITECTURAL DESIGN	
320 WEST 13TH STREET, NEW YORK, NY 10014	AND CONSULTATION	1,071,325.
COMMUNITY COUNSELING SERVICE, 527 MADISON	CAPITAL PROJECTS	
AVENUE, 5TH FLOOR, NEW YORK, NY 10022	FUNDRAISING CONSULTA	526,673.
ELITE INVESTIGATIONS, LLC, 2001 CENTRAL	BUILDING AND	
PARK AVENUE, NEW YORK, NY 10710	FACILITIES SECURITY	491,238.
2 Total number of independent contractors (including but not limited to those lists \$100,000 of compensation from the organization 4.5	ed above) who received more than	

\$100,000 of compensation from the organization 45

SEE PART VII, SECTION A CONTINUATION SHEETS

=	KK SHAKESI								13-184	4034
Part VII Section A. Officers, Directors,	Trustees, Key E	nplo	oyee			ligh	est			
(A) Name and title	(B) Average hours	(c		(C Posit all t	tion		lv)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee		Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(28) MICHAEL PRICE	1.00									
BOARD MEMBER		Х						0.	0.	0
(29) JULIE RICE	1.00									
BOARD MEMBER		Х						0.	0.	0
(30) JANICE COOK ROBERTS	2.00									
BOARD MEMBER		Х						0.	0.	0
(31) WENDI ROSE	1.00									
BOARD MEMBER		Х						0.	0.	0
(32) ALEXANDRA SHIVA	2.00									
BOARD MEMBER		Х						0.	0.	0
(33) JAYMERE STEIN	2.00								0	0
BOARD MEMBER	4 00	Х						0.	0.	0
(34) JIM STEINBERG	4.00	,,							0	
SOARD MEMBER	1 00	Х						0.	0.	0
(35) STEVEN C. TAUB	1.00	٠,,							0	0
BOARD MEMBER	4 00	Х						0.	0.	0
(36) ARIELLE TEPPER	4.00	х						0.	0.	0
BOARD MEMBER (37) TERESA TSAI	4.00	^						0.	0.	0
BOARD MEMBER	4.00	Х						0.	0.	0
(38) REGINALD VAN LEE	2.00							0.	0.	0
BOARD MEMBER	2.00	Х						0.	0.	0
(39) ALEX VOLCKHAUSEN	2.00							0.	0.	
BOARD MEMBER	2.00	x						0.	0.	0
(40) SAM WATERSON	1.00								•	
BOARD MEMBER	1.00	x						0.	0.	C
(41) AUDREY WILF	1.00									
BOARD MEMBER		х						0.	0.	C
(42) FRANCES WILKINSON	1.00									
BOARD MEMBER		х						0.	0.	0
(43) ANNE CLARKE WOLFF	2.00							_	-	-
BOARD MEMBER		х						0.	0.	0
(44) ALISA AMAROSA WOOD	4.00									
SOARD MEMBER		Х						0.	0.	0
45) PAUL J EUSTIS	40.00									
ARTISTIC DIRECTOR		х		Х				988,370.	0.	229,880
(46) PATRICK WILLINGHAM	40.00									
EXECUTIVE DIRECTOR		Х		Х				685,800.	0.	37,148
(47) KRISTINA HOGE	40.00									
		1	1	1 1	Х	ı	1	283,491.	0.	47,259

Form 990 NEW YORK	SUAVESI	7 6/	AKI	1 2	. E.	2.T. 7	LVZ	ALI	13-184	4034
Part VII Section A. Officers, Directors, Tru	ustees, Key Eı	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
(A) Name and title	(B) Average hours			(C Posi	C) ition	ı		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(48) RUTH E. STERNBERG	40.00	-			.			216 000	0	EE 000
PRODUCTION EXECUTIVE	40.00				Х			216,088.	0.	55,009.
(49) JEREMY ADAMS MANAGING DIRECTOR	40.00	-			х			203,305.	0.	41,765.
(50) VALERIE SIMMONS MILLER	40.00				Δ			203,303.	0.	41,705.
SENIOR DIRECTOR, OPS & FACILITY	40.00	1			х			186,662.	0.	37,981.
(51) THOMAS M. MCCANN	40.00							100,002.	<u> </u>	37,301
CHIEF MARKETING OFFICER	1000	1			х			209,330.	0.	23,989.
(52) SAHEEM ALI	40.00									
ARTISTIC AND RESIDENT DIRECTOR		1				х		217,854.	0.	39,829.
(53) MANDY HACKETT	40.00							,		,
ASSOCIATE ARTISTIC DIRECTOR		1				Х		212,710.	0.	31,539.
(54) SARAH ROSEN	40.00									
SENIOR DIRECTOR, HUMAN RESOURCES		1				Х		190,683.	0.	27,615.
(55) KRISTEN GONGORA	40.00									
DIRECTOR, STRATEGIC ADVANCEMENT						Х		176,934.	0.	18,619.
(56) ROSALIND BARBOUR	40.00									
ADMIN CHIEF OF STAFF						Х		166,874.	0.	27,122.
		_								
		-								
			_							
		-								
			-							
		-								
		1								
		1								
		1								
		1								
		L	L		<u> </u>		L			
Total to Part VII, Section A, line 1c								3,738,101.		617,755.

Part VIII Statement of Revenue

			Check if Schedule O conta	ains a re	sponse	or note to any lin	ne in this Part VIII			
					•	,	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenuè excluded from tax under
								function revenue	business revenue	sections 512 - 514
တ္ ဗ	-1	_	Federated campaigns	1	а					
an					b b					
اع ق			Membership dues			2 704 919				
fts			Fundraising events		c	2,704,918.				
<u>iā</u>			Related organizations		d	2 415 400				
Sin			Government grants (contributi	· · -	е	3,415,498.				
e i		f	All other contributions, gifts, grant							
들취			similar amounts not included abov	/e <u> </u> 1	f	23,067,582.				
Contributions, Gifts, Grants and Other Similar Amounts		g	Noncash contributions included in lines	1a-1f 1	g \$	1,465,824.				
<u>a</u> 0		h	Total. Add lines 1a-1f				29,187,998.			
						Business Code				
9	2	а	BOX OFFICE INCOME			711110	5,250,077.	5,250,077.		
Program Service Revenue		b	CO-PRODUCTION FEES, EN	HANCEM	ENT I	900099	1,949,724.	1,949,724.		
Sugar		С	WORKSHOPS/EVENTS			900099	85,368.	85,368.		
eve		d								
Pg R		е								
<u>r</u>		f	All other program service rever	nue						
			Total. Add lines 2a-2f				7,285,169.			
	3	3	Investment income (including				, ,			
	Ū						1,462,002.		5,368.	1456634.
	4		Income from investment of tax						,,,,,,,	
	5			pt bond			11,978,310.			11978310.
	3		noyalies		Real	(ii) Personal	11,370,310.			11370310.
		_	O	<u> </u>	5,412.	` '				
			Gross rents 6a	31	0.	•				
			Less: rental expenses 6b	2.1		•				
			Rental income or (loss) 6c		5,412.	•	215 410			215 410
			Net rental income or (loss)			(*) 04	315,412.			315,412.
	7	а	Gross amount from sales of	<u> </u>	urities	(ii) Other				
			assets other than inventory 7a	16,44	4,999.					
•		b	Less: cost or other basis							
nu				16,58		,				
Other Revenue		С	Gain or (loss) 7c	-14	3,601.	,				
, a		d	Net gain or (loss)		<u></u>		-143,601.			-143,601.
he	8	а	Gross income from fundraising ev	ents (no	t					
₽			including \$ 2,704,	,918. d	of					
			contributions reported on line	1c). See	,					
			Part IV, line 18		8a	278,754.				
		b	Less: direct expenses		8b	278,754.				
		С	Net income or (loss) from fund	raising e	events		0.			
	9	а	Gross income from gaming ac	tivities.	See					
			Part IV, line 19		9a					
		b	Less: direct expenses							
		С	Net income or (loss) from gam	ina activ	/ities					
			Gross sales of inventory, less i							
			and allowances		10a					
		h	Less: cost of goods sold			<u> </u>				
			Net income or (loss) from sales							
=		Ť		. J. 111VC		Business Code				
Miscellaneous Revenue	11	a	MISCELLANEOUS INCOME			900099	229,317.	229,317.		
ne Jue			CONCESSION			900099	94,845.	94,845.		
ella Ver		-					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	71,013.		
Re		۲ C	All other revenue							
Σ			All other revenue				324 162			
		е	Total Add lines 11a-11d				324,162.		E 260	12606755
	12		Total revenue. See instructions				50,409,452.	7,609,331.	5,368.	13606755.

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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).

D-	Check if Schedule O contains a respon	(A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	550 255	550 255		
	and domestic governments. See Part IV, line 21	558,377.	558,377.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	10,000.	10,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	3,280,025.	2,591,879.	332,521.	355,625
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	27,310,602.	21,580,860.	2,768,684.	2,961,058
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	1,471,808.	1,163,024.	149,208.	159,576
9	Other employee benefits	2,429,509.		246,298.	263,411
10	Payroll taxes	2,230,823.	1,762,798.	226,156.	241,869
11	Fees for services (nonemployees):				
а	Management	1,188,659.	304,663.	803,488.	80,508
b	Legal	442,283.	329,610.	84,172.	28,501
С		129,864.	3,990.	125,874.	
d	Lobbying	261,000.		242,919.	18,081
е	D (' 1(1 ' ' ' O D ' N ' ' 47	998,817.			998,817
f	Investment management fees	152,945.		152,945.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	4,597,649.	4,006,489.	408,511.	182,649
12	Advertising and promotion	1,152,927.	981,364.	192.	171,371
13	Office expenses	1,454,124.	1,106,439.	112,033.	235,652
14	Information technology	944,214.	679,696.	86,362.	178,156
15	Royalties	136,346.	135,846.		500
16	Occupancy	4,405,352.	3,526,549.	410,861.	467,942
17	Travel	2,716,665.	1,794,160.	168,804.	753,701
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,346,520.	1,812,381.	249,722.	284,417
23	Insurance	404,907.	312,738.	43,091.	49,078
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	PRODUCTION COSTS	2,655,390.	2,652,475.	1,084.	1,831
b	MISCELLANEOUS	275,579.	213,275.	59,284.	3,020
С	PROFESSIONAL DEVELOPMEN	135,061.	70,639.	32,198.	32,224
d	BAD DEBT	5,656.		5,656.	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	61,695,102.	47,517,052.	6,710,063.	7,467,987
<u> </u>	Joint costs. Complete this line only if the organization	·	-	·	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2022) Part X | Balance Sheet

	Check if Schedule O contains a response or note	to an	v line in this Part X			
			y into internot dieze			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	1,788,413.	1	1,096,502.		
2	Savings and temporary cash investments			12,880,379.	2	1,003,751.
3				20,484,828.	3	20,246,781.
4				10,859,808.	4	2,724,015.
5						
	trustee, key employee, creator or founder, substa	antial (contributor, or 35%			
	controlled entity or family member of any of these	e pers	ons		5	
6	Loans and other receivables from other disqualified	ed pe	rsons (as defined			
	under section 4958(f)(1)), and persons described	in sec	ction 4958(c)(3)(B)		6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			1,166,330.	9	1,464,331.
10a						
b	'					31,280,994.
11						48,574,461.
12				5,789,183.	12	5,907,630.
13			13			
14		0.660.805		25 405 560		
15	Other assets. See Part IV, line 11					35,407,769.
16				147,706,234.		
		4,6/1,482.		8,197,718.		
		777 064	_	1 200 701		
				///,964.		1,399,791.
					21	
22						
		-				
					24	
25						
	of Cobodulo D		•	5 875 257.	25	20,998,432.
26						30,595,941.
20				11/521/7051	20	30/333/3110
		K IICI	<u> </u>			
27				72,507,676.	27	65,180,515.
						51,929,778.
				, ,		, ,
		-,				
29					29	
					30	
	Total net assets or fund balances			125,161,369.	32	117,110,293.
32					. –	147,706,234.
-	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or trustee, key employee, creator or founder, substate controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 1 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete P Loans and other payables to any current or forme trustee, key employee, creator or founder, substate controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these controlled entity or family member of any of these cont	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or forme trustee, key employee, creator or founder, substantial or controlled entity or family member of any of these pers 6 Loans and other receivables from other disqualified per under section 4958(f)(1)), and persons described in second loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 Intangible assets 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 3 Grants payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV 22 Loans and other payables to any current or former offic trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pers 23 Secured mortgages and notes payable to unrelated third 10ther liabilities (including federal income tax, payables parties, and other liabilities not included on lines 17-24) of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check her and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check her and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment and complete lines 29 through 33.	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(8) Notes and loans receivable, net Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 44,590,395. b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 20 Capital stock or trust principal, or current funds 31 Retained earnings, endowment, accumulated income, or other funds	1 Cash - non-interest-bearing	1 Cash · non-interest-bearing

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			9,4	
2	Total expenses (must equal Part IX, column (A), line 25)	2			5,1	
3	Revenue less expenses. Subtract line 2 from line 1	3	-11			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	125	, 16	1,3	<u>69.</u>
5	Net unrealized gains (losses) on investments	5	2 ,	, 99	1,6	81.
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 on Schedule O)	9		24	2,8	93.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	117	, 11	0,2	93.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.	Г			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ		:			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	
	· · · · · · · · · · · · · · · · · · ·			Form	990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public

Employer identification number

OMB No. 1545-0047

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

Inspection

NEW YORK SHAKESPEARE FESTIVAL 13-1844852 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) An agricultural research organization described in section 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	45866012.	33473363.	45014557.	43288819.	29187998.	196830749
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	45866012.	33473363.	45014557.	43288819.	29187998.	196830749
	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)						2220208.
6	Public support. Subtract line 5 from line 4.						194610541
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	45866012.	33473363.	45014557.	43288819.	29187998.	196830749
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	25700833.	10597975.	1677193.	18596581.	13755724.	70328306.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	11,591.				3,931.	15,522.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	298,381.	201,252.	11,193.	197,732.		1032720.
11	Total support. Add lines 7 through 10						268207297
12	Gross receipts from related activities	, etc. (see instruction	ons)			12 43	,897,812.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3)	
	organization, check this box and stop						<u></u>
	tion C. Computation of Publ						
	Public support percentage for 2022 (14	72.56 %
	Public support percentage from 202					15	70.64 %
16a	33 1/3% support test - 2022. If the	•		•		•	
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qua						
17a	a 10% -facts-and-circumstances test - 2022. 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 to	-		• • •			
b	10% -facts-and-circumstances tes						10% or
	more, and if the organization meets t				-		
	organization meets the facts-and-circ						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	and see instruction	ıs

Schedule A (Form 990) 2022

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.)

Se	qualify under the tests listed b	elow, please com	plete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(a) 2010	(b) 2019	(6) 2020	(u) 2021	(e) 2022	(i) iotai
'	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
2	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4							
4	Tax revenues levied for the organ-						
	ization'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						
	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and						
ŀ	3 received from disqualified persons Amounts included on lines 2 and 3 received						
•	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	• • • • • • • • • • • • • • • • • • • •	(=) 0010	(h) 0010	(-) 0000	(4) 0001	(-) 0000	(6) Total
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6 Gross income from interest,						
100	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
K	Unrelated business taxable income (less section 511 taxes) from businesses						
	onguired ofter June 20, 1075						
	Add lines 10a and 10b Net income from unrelated business						
•••	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
10	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)			f		F04(-)(0)ii	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·	, , ,	,	•	() ()	ilon,
<u>S</u>	check this box and stop here ction C. Computation of Publ		rcentage				L
	-			l (f))		15	
	Public support percentage for 2022 (I					 	<u>%</u>
	Public support percentage from 2021 ction D. Computation of Investigation					16	<u>%</u>
	<u> </u>					147	
17						17	<u>%</u>
18	Investment income percentage from 2						% 17 is not
198	a 33 1/3% support tests - 2022. If the						TOIT 2I 11
	more than 33 1/3%, check this box at						
K	33 1/3% support tests - 2021. If the						
00	line 18 is not more than 33 1/3%, che						
U	Private foundation. If the organizatio	ri did Hot check a	1 DOX OH IIHE 14, 18	a, or 190, check t	ins box and see in	อนนบนปีโจ้	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- 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)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Par	t IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Seci	ion D. All Type III Supporting Organizations			
			Yes	No
	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?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion 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 yeafsee instruction	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	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.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	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? If "Yes" or "No" provide details in Part VI .	3a		
a	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgar	nizations					
1								
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	1				
Sect	ion 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						
Sect	ion 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):							
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						
е	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 0.015 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 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 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-functional	ally integrate	ed Type III supporting org	anization (see				
	instructions).							

Schedule A (Form 990) 2022

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
c	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i_	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

Part VI	Cumplemental Information Describe the evaluations required by David Bine 10. David Bine 17s or 17s. David Bine 10.
T dit 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.)
_	

SCHEDULE C (Form 990)

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 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

			tions: Complete Part III.			
Nan	ne of organizati				E	mployer identification number
			K SHAKESPEARE FE			13-1844852
Pa	art I-A Co	mplete if the org	ganization is exempt und	ler section 501(c)	or is a section 52	7 organization.
2	Political camp	paign activity expendit	zation's direct and indirect politic cures ign activities			. \$
Pa	art I-B Co	mplete if the ord	ganization is exempt und	ler section 501(c)(3).	
1						. \$
2	Enter the amo	ount of any excise tax	incurred by organization manag	ers under section 4955		\$
3	If the organiza	ation incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
k	If "Yes," desc	ribe in Part IV.				
Pa	art I-C Co	mplete if the org	ganization is exempt und	ler section 501(c),	except section 5	01(c)(3).
1	Enter the amo	ount directly expende	d by the filing organization for se	ction 527 exempt funct	ion activities	. \$
2	Enter the amo	ount of the filing organ	nization's funds contributed to ot	her organizations for se	ection 527	
	exempt functi	on activities				. \$
3	Total exempt	function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL,		
4			1120-POL for this year?			
5	made paymer contributions	nts. For each organiza	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organiz a separate political orga	ation's funds. Also entanization, such as a se	er the amount of political
	(a)	Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization' funds. If none, enter	s contributions received and

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

					HAKESPEARE F			844852 Page 2			
Pa	art II-A	Complete if the org	ganization i	s exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under			
	Oll-	section 501(h)).	4: 11 4			Double of the second		ddu FINI			
4	Check		-		filiated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,			
,	Chaole	expenses, and sha		, ,	expenditures). ınd "limited control" pro	wisions apply					
3	Check	Limi (The term "expendence")	11.7	(a) Filing organization's totals	(b) Affiliated group totals						
18	a Total lob	bying expenditures to infl	uence public o	pinion	(grassroots lobbying)						
ŀ	b Total lob	bying expenditures to infl	uence a legisla	tive bo	dy (direct lobbying)		261,000.				
(c Total lob	bying expenditures (add I	ines 1a and 1b)			261,000.				
		empt purpose expenditur					55,216,680.				
•	e Total ex	empt purpose expenditure					55,477,680.				
1		g nontaxable amount. Ent					1,000,000.				
	If the am	ount on line 1e, column (a) o	or (b) is:	The lob	obying nontaxable am	ount is:					
	Not over	\$500,000			the amount on line 1e.						
	Over \$5	00,000 but not over \$1,00	0,000	\$100,0	00 plus 15% of the exc	ess over \$500,000.					
	Over \$1	,000,000 but not over \$1,5	500,000	\$175,0	00 plus 10% of the exc	ess over \$1,000,000.					
	Over \$1	500,000 but not over \$17	,000,000	\$225,0	00 plus 5% of the exce	ss over \$1,500,000.					
	Over \$1	7,000,000		\$1,000	,000.						
Ç	g Grassro	ots nontaxable amount (er	nter 25% of lin	e 1f) .			250,000.				
ł	h Subtrac	t line 1g from line 1a. If zer	o or less, ente	r -0- .			0.				
į	i Subtrac	t line 1f from line 1c. If zero	o or less, enter	·-0			0.				
	j If there i	s an amount other than ze	ero on either lin	e 1h or	line 1i, did the organiz	ation file Form 4720	_				
	reporting	g section 4911 tax for this	year?				L	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.)										
			Lobbyin	g Expe	nditures During 4-Yea	ar Averaging Period					
		alendar year Il year beginning in)	(a) 2019	9	(b) 2020	(c) 2021	(d) 2022	(e) Total			
28	a Lobbyin	g nontaxable amount				1,000,000.	1,000,000.	2,000,000.			
ł	•	g ceiling amount if line 2a, column(e))						3,000,000.			

Schedule C (Form 990) 2022

441,000.

500,000.

750,000.

261,000

250,000.

c Total lobbying expenditures

d Grassroots nontaxable amount e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

180,000.

250,000.

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 e	Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity.	Yes No Amount			ount	
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: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
q	Media advertisements? Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
	Total. Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)((5), or se	ection		
				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 campaign activity expenditures from the	ne prior year	? 3			
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part		e 3, is	
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).					
	Current year					
b	Carryover from last year					
C	Total					
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 exceeds the argentization agree to correct the reasonable estimate of pended utible labbling and					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and payaged three port year?		4			
5	expenditures next year? Taxable amount of lobbying and political expenditures. See instructions		5			
	t IV Supplemental Information		3			
	ide 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-	Δ lines 1	and 2 (See		
	actions); and Part II-B, line 1. Also, complete this part for any additional information.	not, rait ii	, iii 100 T	and 2 (000		

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 instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number 13-1844852

Pai	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		Similar Funds	or Accounts. Complete if the
	organization answered Tes Officialities, in	(a) Donor advis	ed 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		eld in donor advise	d funds
	are the organization's property, subject to the organization's	~		
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for a	ny other purpose c	onferring
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Ye	es" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply	<u>).</u>	
	Preservation of land for public use (for example, recrea	ation or education)	Preservation of a	historically important land area
	Protection of natural habitat		$oldsymbol{ol{ol}oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}}}$	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contri	bution in the form o	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic str	ructure included in (a)		2c
d	Number of conservation easements included in (c) acquired	•		
	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or	terminated by the	organization during the tax
	year			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe		ction, handling of	
	violations, and enforcement of the conservation easements i			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, a	and enforcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and o	nforcina consonvati	on agraments during the year
•	Amount of expenses incurred in monitoring, inspecting, hard	aling of violations, and e	moreing conservati	on easements during the year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requireme	nts of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservati			
	balance sheet, and include, if applicable, the text of the footi	note to the organization	's financial stateme	nts that describes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections o	· ·	easures, or Otl	her Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	•		
	of art, historical treasures, or other similar assets held for pul	·	•	•
	service, provide in Part XIII the text of the footnote to its final			
b	If the organization elected, as permitted under FASB ASC 95	· ·		
	art, historical treasures, or other similar assets held for public	exhibition, education,	or research in furthe	erance of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical tre			gain, provide
	the following amounts required to be reported under FASB A			
а	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			\$

232051 09-01-22

Schedule D (Form 990) 2022

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

Sche	edule D (Form 990) 2022 NEW YORK	SHAKESPE <i>I</i>	ARE FESTIV	AL	13-1	844852	Page 2
	rt III Organizations Maintaining Co	llections of Ar	t, Historical Tr	easures, or Oth			
3	Using the organization's acquisition, accession	, and other records	s, check any of the	following that make	significant use of i	:s	
	collection items (check all that apply):						
а	Public exhibition	d	Loan or exc	hange program			
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's colle	ections and explain	how they further the	he organization's ex	empt purpose in Pa	art XIII.	
5	During the year, did the organization solicit or r	eceive donations o	f art, historical trea	sures, or other simil	ar assets		
	to be sold to raise funds rather than to be main	ntained as part of th	ne organization's co	ollection?		Yes	No
Pa	rt IV Escrow and Custodial Arrange		te if the organizatio	n answered "Yes" o	n Form 990, Part I\	/, line 9, or	
	reported an amount on Form 990, Part 2	X, line 21.					
1a	Is the organization an agent, trustee, custodiar	n or other intermedi	ary for contribution	s or other assets no	t included		_
	on Form 990, Part X?				L	Yes	No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the foll	lowing table:				
						Amount	
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on For	m 990, Part X, line 2	21, for escrow or cu	ustodial account liab	oility?L	l Yes <u> </u>	No
	If "Yes," explain the arrangement in Part XIII. C					L	
Pa	rt V Endowment Funds. Complete if the					/ /- > Four you	ro book
	<u> </u>	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years bac	+	
1a		31,568,514.	29,277,354.	· · ·	· · ·	20,43	6,220.
b	Contributions	1 602 165	5,950,000.	· · ·		22	1 474
С.	Net investment earnings, gains, and losses	1,693,165.	-2,773,840.	4,643,349.	1,621,311	23	1,474.
d	Grants or scholarships						
е	Other expenditures for facilities	1 110 057	005 000	005 000	0.05 0.00		- 000
	and programs	-1,112,257.	-885,000.	-885,000.	-885,000	-88	5,000.
f	Administrative expenses	32 140 422	21 560 514	20 277 254	20 510 005	10.70	2 604
g	End of year balance	32,149,422.	31,568,514.	<u> </u>	20,519,005	19,78	2,094.
2	Provide the estimated percentage of the current	• 0 0 0 0		a)) neid as:			
a	Board designated or quasi-endowment Permanent endowment 82.9620		_%				
b	17 0200	%					
С		d d 1000/					
2-	The percentages on lines 2a, 2b, and 2c should	=	4: 4l4 l -		Ala a		
Зa	Are there endowment funds not in the possess	sion of the organiza	tion that are neid a	na administered for	trie	Yes	s No
	organization by:						X
	(i) Unrelated organizations					3a(i)	X
	(ii) Related organizations					3a(ii)	+ 25
b	If "Yes" on line 3a(ii), are the related organization					3b	
4 Pعا	Describe in Part XIII the intended uses of the ort VI Land, Buildings, and Equipme		winent iunas.				
. a	Complete if the organization answered		. Part IV. line 11a S	See Form 990 Part >	C. line 10.		
	Description of property	(a) Cost or ot	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Accumulated	(d) Book va	الم
	bescription of property	basis (investm	' '		epreciation	(u) DOOK Va	iue
	Land	1 (, , , , , , ,	, ,			

		, ,	, , , , , , , , , , , , , , , , , , ,	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		41,459,264.	11,171,755.	
d Equipment		1,244,703.	539,606.	705,097.
e Other		1,886,428.	1,598,040.	288,388.
Total. Add lines 1a through 1e. (Column (d) must equa	31,280,994.			

Schedule D (Form 990) 2022

Part VII	Investments -	Other Sec	curities.	

	AKESPEARE FE	STIVAL 13	3-1844852 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 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 en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
CONCERNICETON COCE DETAININ	Description Date Date		(b) Book value
(1) CONSTRUCTION COST REIMBUR	SEMENT DUE FI	ROM THE CITY OF NEW	F17 202
(2) YORK	3.00000		517,393.
(3) BONDS, DEPOSITS AND OTHER	ASSETS		300,678.
(4) CONSTRUCTION IN PROGRESS	110E 3 00EE0		19,205,247.
(5) OPERATING LEASE RIGHT-OF-	USE-ASSETS		15,384,451.
(6)			
(7)			
(8)			
(9)	- 45\		25 407 760
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)		35,407,769.
Part X Other Liabilities.	F 000 D+ IV/ II	- 44446 O F 000 P+ V line 0	-
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e TTe or TTf. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			2 277 220
(2) ACCRUED PENSION LIABILITY (3) OPERATING LEASE LIABILITI			3,377,332.
	БO		11,021,100.
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Schedule D (Form 990) 2022

20,998,432.

(6) (7) (8)

Schedule D (Form 990) 2022

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

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

Employer identification numb

vame of the organization NEW YOR	RK SHAKESPEARE FEST	CIVA	L		13-1844	852
	Complete if the organization answ			n Form 990, Part IV,	line 17. Form 990-E2	Z filers are not
 Indicate whether the organization rai a X Mail solicitations b X Internet and email solicitation c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	sed funds through any of the following with a solicitar of the solicitar of the following with a solicitar of the solicitar o	ation of ation of I fundra al (includorofess	non-g gover aising ding o ional t	overnment grants rnment grants events fficers, directors, tru fundraising services?	stees, or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
GURA ASSOCIATES, LTD - 505		Yes	No			
WEST END AVENUE, NEW YORK, NY	MAJOR GIFT CONSULTING		Х	0.	360,000.	0 .
CCS FUNDRAISING - 527 MADISON AVE, NEW YORK, NY 10022	CAPITAL CAMPAIGN CONSULTANTS		х	0.	460,009.	0
SD&A TELESERVICES - 5757 W						
CENTURY BLVD #300, LOS	TELESALES SUPPORT		Х	0.	178,808.	0
Total					998,817.	
3 List all states in which the organization or licensing.	on is registered or licensed to solicit			I s or has been notified	· · · · · · · · · · · · · · · · · · ·	I egistration
NY,NJ,PA,CA,GA,FL,IL,	MA,MI,MN,RI,VA					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2022

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

		of fundraising event contributions and gr	oss income on Form 990	0-EZ, lines 1 and 6b. List	events with gross receil	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events
			ANNUAL GALA			(add col. (a) through
ø)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	2,983,672.			2,983,672.
	2	Less: Contributions	2,704,918.			2,704,918.
	3	Gross income (line 1 minus line 2)	278,754.			278,754.
	4	Cash prizes				
S	5	Noncash prizes				
pense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	236,690.			236,690.
	8	Entertainment				
	9	Other direct expenses	42,064.			42,064.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)			278,754.
	11	Net income summary. Subtract line 10 from li				0.
Pa	rt I	Gaming. Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.			1	
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
Revenue				billigo/progressive billigo		col. (a) through col. (c))
Re	_					
_	1	Gross revenue				
	2	Cash prizes				
ses	_	Cash ph200				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes%	Yes%	
	6	Volunteer labor	☐ No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	0	Not gaming income summany Subtract line 7	from line 1 column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)			
9	Fn	ter the state(s) in which the organization condu	icts damind activities.			
		the organization licensed to conduct gaming a	_	states?		Yes No
		No," explain:				
-						
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or to	erminated during the tax	year?	Yes No
b	If "	Yes," explain:				

Schedule G (Form 990) 2022

232082 10-27-22

Sch	nedule G (Form 990) 2022	NEW	YORK	SHAKESPEARE FESTIVAL	13-1844	852	Page 3
11	Does the organization conduct	gaming act	tivities witl	n nonmembers?		Yes	☐ No
12	Is the organization a grantor, be	neficiary o	r trustee c	of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming	?				Yes	└── No
	Indicate the percentage of gami						
							%
							<u>%</u>
14	Enter the name and address of	the person	who prep	pares the organization's gaming/special events books and record	s:		
	Name						
	Address						
15a	Does the organization have a co	ontract with	n a third p	arty from whom the organization receives gaming revenue?		Yes	☐ No
ŀ	If "Yes," enter the amount of ga	mina rever	nue receiv	ed by the organization \$ and the amo	ınt		
•	of gaming revenue retained by t	•		and the arriva	ar it		
	If "Yes," enter name and addres		_				
	·		. ,				
	Name						
	Address						
16	Gaming manager information:						
	darning manager imormation.						
	Name						
	Gaming manager compensation	n \$					
	Description of services provided	<u></u>					
	Director/officer	☐ Em	ployee	Independent contractor			
	<u> </u>		pioyee	maoponaoni contractor			
17	Mandatory distributions:						
		er state lav	w to make	charitable distributions from the gaming proceeds to			
	retain the state gaming license?					Yes	└─ No
k		-		te law to be distributed to other exempt organizations or spent in	the		
П	organization's own exempt activ						01 101
Pa				the explanations required by Part I, line 2b, columns (iii) and (v); a rovide any additional information. See instructions.	and Part III, I	nes 9,	9b, 10b,
	150, 150, 16, and 170, a	as applicat	ole. Also p	rovide any additional information. See instructions.			
SC	HEDULE G. PART I	. LINE	E 2B.	LIST OF TEN HIGHEST PAID FUNDRAL	ISERS:		
		,					
,_		- ~	~				
<u>(I</u>) NAME OF FUNDRA.	ISER:	GURA	ASSOCIATES, LTD			
(I	.) YDDBEGG OE EIINI	D B A T C F	7D • 50	05 WEST END AVENUE, NEW YORK, NY	10024		
<u> </u>	.) ADDRESS OF FUNI	DKAISI	K. J.	JO WEST END AVENUE, NEW TOAK, NI	10024	•	
_							
<u>(I</u>) NAME OF FUNDRA	ISER:	CCS 1	FUNDRAISING			
/ T	י) אַרווספּפפ ספּ פּזיאַזוּ	חקאדפי	7D. F	27 MADISON AVE, NEW YORK, NY 100	122		
<u>(I</u>	OF FUNI סטמאטעא (.	PIVIDI	1K. J.	TO TOUR AVE, NEW TORK, NT 100	7 4 4		
(I) NAME OF FUNDRA	ISER:	SD&A	TELESERVICES			

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization 13-1844852 NEW YORK SHAKESPEARE FESTIVAL 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 X Yes criteria used to award the grants or assistance? No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of 1 (a) Name and address of organization (c) IRC section (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) DEEELLIS, INC. 304 QUINCY STREET, APT 2B PASSTHROUGH GRANT BROOKLYN, NY 11216 84-1913169 0 10,000 GENERAL OPERATING SUPPORT FOR THE PERFORMANCE, THE SHAKESPEARE SOCIETY OF AMERICA, INC. - 425 LAFAYETTE COMMENTARY, AND STREET - NEW YORK, NY 10003 EDUCATIONAL ACTIVITIES 13-3974836 501(C)(3) 542,377 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

Part III Grants and Other Assistance to Domestic Individua Part III can be duplicated if additional space is needed	•	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	, ago
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
PASSTHROUGH GRANT	1	10,000.	0.		
Part IV Supplemental Information. Provide the information re	quired in Part I, lin	ie 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
GRANTEE IS REQUIRED TO SUBMIT A B	UDGET FOR	APPROVAL.	ONCE APP	ROVED, NYSF	
MAINTAINS THE BUDGET AND MONITORS	GRANT EX	PENSES AGA	INST IT.	PAYMENT TO	
THE GRANTEE IS USUALLY IN THE FOR	M OF REIM	BURSEMENT.	GRANTEE	IS REQUIRED	
TO SUBMIT RECEIPTS AND SUPPORTING	DOCUMENT	ATION IN C	RDER TO BE	REIMBURSED.	
DEPENDING ON THE PROJECT, INTERIM	PROGRESS	REPORTS M	IAY BE REQU	IRED. A	
FINAL REPORT AND ACCOUNTING STATE	MENT IS R	EQUIRED AT	THE END O	F THE	

PROJECT.

Part IV Supplemental Information
A MULTI-YEAR BUDGET HAS BEEN INCORPORATED INTO THE AFFILIATION AGREEMENT
BETWEEN NYSF AND THE SHAKESPEARE SOCIETY OF AMERICA, INC. NYSF REVIEWS THE
BUDGET AND EXPENSES DURING THE YEAR. INTERIM FINANCIAL REPORTS ARE REVIEWED
REGULARLY. A FINAL REPORT AND ACCOUNTING STATEMENT IS REQUIRED AT THE END
OF THE YEAR.
PART III
GRANTEE IS REQUIRED TO SUBMIT A BUDGET FOR APPROVAL. GRANTEE REPORTS ON
THE ACTIVITIES AND, IF REQUIRED, SUBMITS A FINAL REPORT AND ACCOUNTING
STATEMENT AT THE END OF THE PROJECT.

Schedule I (Form 990)

SCHEDULE J (Form 990)

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.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number 13-1844852

Pa	art 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 Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on 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	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the 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			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:	40		Х
a	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4a 4b	Х	
D	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The story of lines 4a o, list the persons and provide the applicable amounts for each item in a cini.			
	Only section 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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	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:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	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 on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

For each individual whose compensation must be reported 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 aren't 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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PAUL J EUSTIS	(i)	964,345.	0.	24,025.	205,936.	23,944.	1,218,250.	3,525.
ARTISTIC DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PATRICK WILLINGHAM	(i)	565,300.	100,000.	20,500.	35,690.	1,458.	722,948.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KRISTINA HOGE	(i)	276,626.	0.	6,865.	13,201.	34,058.	330,750.	0.
SENIOR DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RUTH E. STERNBERG	(i)	210,260.	0.	5,828.	24,992.	30,017.	271,097.	0.
PRODUCTION EXECUTIVE	(ii) [0.	0.	0.	0.	0.	0.	0.
(5) JEREMY ADAMS	(i)	197,914.	0.	5,391.	27,510.	14,255.	245,070.	0.
MANAGING DIRECTOR	(ii) [0.	0.	0.	0.	0.	0.	0.
(6) VALERIE SIMMONS MILLER	(i)	181,620.	0.	5,042.	20,467.	17,514.	224,643.	0.
SENIOR DIRECTOR, OPS & FACILITY	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) THOMAS M. MCCANN	(i)	203,838.	0.	5,492.	13,951.	10,038.	233,319.	0.
CHIEF MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) SAHEEM ALI	(i)	212,636.	0.	5,218.	15,699.	24,130.	257,683.	0.
ARTISTIC AND RESIDENT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MANDY HACKETT	(i)	207,108.	0.	5,602.	17,199.	14,340.	244,249.	0.
ASSOCIATE ARTISTIC DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) SARAH ROSEN	(i)	185,568.	0.	5,115.	11,305.	16,310.	218,298.	0.
SENIOR DIRECTOR, HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) KRISTEN GONGORA	(i)	172,222.	0.	4,712.	8,081.	10,538.	195,553.	0.
DIRECTOR, STRATEGIC ADVANCEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ROSALIND BARBOUR	(i)	162,836.	0.	4,038.	5,977.	21,145.	193,996.	0.
ADMIN CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
[((ii)							
	(i)							
((ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

PART I, LINE 1A:

THE ARTISTIC DIRECTOR AND EXECUTIVE DIRECTOR ARE PERMITTED TO BOOK UPGRADED

SEATING ON OVERNIGHT FLIGHTS THAT ARE SIX HOURS OR LONGER.

PAUL EUSTIS RECEIVED GROSS-UP PAYMENTS FOR IMPUTED TAXES ON HIS CONTRACTUAL

PURSUANT TO HIS EMPLOYMENT AGREEMENT, PAUL J. EUSTIS PARTICIPATES IN AN

LIFE INSURANCE POLICY AND 403B CONTRIBUTIONS.

PART I, LINE 4B:

NONQUALIFIED DEFERRED COMPENSATION ARRANGEMENT UNDER SECTION 457(F) OF THE

INTERNAL REVENUE CODE, WHICH IS DESIGNED TO PROVIDE A NONQUALIFIED

RETIREMENT BENEFIT UPON COMPLETION OF THE CONTRACT TERM, AND IS SUBJECT TO

A SUBSTANTIAL RISK OF FORFEITURE. THE RETIREMENT BENEFIT IS BEING ACCRUED

RATABLY OVER THE CONTRACT TERM. \$159,493 WAS VESTED DURING THE 2022

CALENDAR YEAR AND THE ACCRUAL IS BEING REPORTED AS DEFERRED COMPENSATION.

\$3,525 WAS PAID DURING THE 2022 CALENDAR YEAR AND REPORTED AS REPORTABLE

COMPENSATION.

PURSUANT TO HIS EMPLOYMENT AGREEMENT, PATRICK WILLINGHAM PARTICIPATES IN AN

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.
NONQUALIFIED DEFERRED COMPENSATION ARRANGEMENT UNDER SECTION 457(F) OF THE
INTERNAL REVENUE CODE, WHICH IS DESIGNED TO PROVIDE A NONQUALIFIED
RETIREMENT BENEFIT UPON COMPLETION OF THE CONTRACT TERM, AND IS SUBJECT TO
A SUBSTANTIAL RISK OF FORFEITURE. THE RETIREMENT BENEFIT IS BEING ACCRUED
RATABLY OVER THE CONTRACT TERM. \$11,201 WAS VESTED DURING THE 2022 CALENDAR
YEAR AND THE ACCRUAL IS BEING REPORTED AS DEFERRED COMPENSATION.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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 instructions and the latest information.

Open to Public Inspection

Employer identification number

Schedule M (Form 990) 2022

	NEW YORK SHA	KESPEA	RE FESTIV	AL	13-1	.844	852	
Pai	rt 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 de noncash contribu	etermir	•	ts
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	27	1,465,824.	FAIR MARKET	' VA	LUE	
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 ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for o	contributions				
	for which the organization completed Form 82	83, Part V, D	Donee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property re	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of	the initial co	ontribution, and wh	nich isn't required to be used	for			
	exempt purposes for the entire holding period					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	itions?	31	Х	
32a	Does the organization hire or use third parties	or related or	rganizations to sol	icit, process, or sell noncash				
	contributions?		_	· · ·		32a	X	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	column (c) fo	or a type of propert	y for which column (a) is che	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2022 232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number 13-1844852

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THROUGH THE PUBLIC THEATER, SHAKESPEARE IN THE PARK AND JOE'S PUB, NYSF

IS DEDICATED TO DEVELOPING AN AMERICAN THEATER THAT IS ACCESSIBLE AND

RELEVANT TO ALL PEOPLE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INNOVATIVE STAGINGS OF THE CLASSICS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

STORIES; AND ERIKA DICKERSON-DESPENZA'S SHADOW/LAND. NEW YORK PREMIERE

PRODUCTIONS INCLUDED: BALDWIN AND BUCKLEY AT CAMBRIDGE, CONCEIVED BY

GREIG SARGEANT WITH ELEVATOR REPAIR SERVICE; AND MADELINE SAYET'S WHERE

WE BELONG. IN ADDITION TO THE ABOVE WORLD AND NEW YORK PREMIER

PRODUCTIONS, THE PUBLIC THEATER ADDITIONALLY PRESENTED LARRAINE

HANSBERRY'S A RAISIN IN THE SUN AS WELL AS THE WORK OF INTERNATIONAL

ARTISTS WITH THE 19TH ITERATION OF THE UNDER THE RADAR FESTIVAL

PROVIDING A PLATFORM FOR GLOBAL ARTISTS TO DEVELOP THEIR WORKS, BUILD

RELATIONSHIPS, AND EXPLORE TOURING OPPORTUNITIES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

CONTINUED THIS TRADITION OF PRESENTING FREE SHAKESPEARE IN THE PARK

WITH TWO PRODUCTIONS: HAMLET, STARRING ATO BLANKSON-WOOD AND DIRECTED

BY TONY AWARD WINNING DIRECTOR KENNY LEON, AND A MUSICAL ADAPTATION OF

THE TEMPSET FROM OUR PUBLIC WORKS PROGRAM, FEATURING 75 COMMUNITY

MEMBERS ONSTAGE FOR EVERY PERFORMANCE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2022

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number
13-1844852

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THE 2022-23 JOE'S PUB SEASON FEATURED NIGHTLY PROGRAMMING WITH A MIX OF

NEW AND FAMILIAR FACES SUCH AS JUSTIN VIVIAN BOND, BRIDGET EVERETT,

TOSHI REAGON, SHAINA TAUB, JAKE BLOUNT, LEE JIN AH, AND EVA NOBLEZADA.

IN OCTOBER 2022, JOE'S PUB HOSTED THE SECOND ANNUAL EDITION OF HABIBI

FESTIVAL, A WEEK-LONG CELEBRATION OF GROUNDBREAKING ARTISTS FROM

THROUGHOUT THE MIDDLE EAST/NORTH AFRICAN REGIONS. JOE'S PUB ALSO

PRESENTED A FREE OUTDOOR EVENT AT THE ASTOR PLACE PLAZA IN PARTNERSHIP

WITH VILLAGE ALLIANCE CALLED "THE COMMUNITY COOKOUT & THE SOAPBOX

PRESENTS: FOR THE PEOPLE" WITH PERFORMANCES BY ENDEA OWENS & THE

COOKOUT, YAHZARAH, GREG BANKS, AND MORE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MOBILE UNIT

THE MOBILE UNIT REACHES ACROSS ECONOMIC AND GEOGRAPHIC BARRIERS TO THE

ARTS BY STAGING FREE PROFESSIONAL THEATER PRODUCTIONS AND PROGRAMS IN

LOCAL NEIGHBORHOOD VENUES WHERE PEOPLE WITH SEVERELY LIMITED ACCESS TO

THE ARTS ARE CONGREGATED. THE MOBILE UNIT FOCUSES ON TOURING

PRODUCTIONS TO PRISONS, HALFWAY HOUSES, COMMUNITY CENTERS AND OTHER

PLACES WHERE THE MOST CRITICALLY UNDER-SERVED AND OVERLOOKED PARTS OF

THE POPULATION ARE CONGREGATED. THESE PRODUCTIONS ARE THEN PRESENTED

AS PART OF THE DOWNTOWN SEASON AT 425 LAFAYETTE STREET. OVER THE

YEARS, THE MOBILE UNIT HAS SERVED THOUSANDS OF AUDIENCES WITH

CRITICALLY ACCLAIMED PRODUCTIONS.

Name of the organization
NEW YORK SHAKESPEARE FESTIVAL

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FOLLOWING A 2022 TOURING SEASON TRUNCATED BY THE ONGOING EFFECTS OF THE

COVID-19 PANDEMIC, THE MOBILE UNIT WELCOMED BACK ARTISTS AND AUDIENCES

FOR IN-PERSON PERFORMANCES OF THE BILINGUAL MUSICAL ADAPTATION OF THE

COMEDY OF ERRORS, WITH PERFORMANCES IN ALL FIVE BOROUGHS AND AT 425

LAFAYETTE STREET.

PUBLIC WORKS

PUBLIC WORKS PARTNERS WITH COMMUNITY ORGANIZATIONS FROM ALL OVER THE

CITY CREATING BESPOKE CREATIVE PROGRAMMING THAT MEETS THE NEEDS OF

THESE INDIVIDUAL ORGANIZATIONS THAT UNLEASH THE TRANSFORMATIVE POWER OF

THEATER. OVER THE LAST TWELVE YEARS, PUBLIC WORKS HAS LED WORKSHOPS AT

PARTNER SITES ALL OVER THE CITY, GATHERED TO EXPERIENCE LIVE THEATER,

HELD MONTHLY COMMUNAL POTLUCKS, AND FORMED DEEP AND REAL LONGITUDINAL

PARTNERSHIPS.

WITH THE 2022-23 SEASON, PUBLIC WORKS CONTINUED ITS YEAR-ROUND EFFORTS

ENGAGING THE COMMUNITY THROUGH WEEKLY CLASSES, MONTHLY SOCIAL

GATHERINGS, SEMI-REGULAR WORKSHOPS, AND OPPORTUNITIES TO ATTEND PUBLIC

THEATER PERFORMANCES. THE PUBLIC WORKS TEAM WORKS CLOSELY WITH EIGHT

COMMUNITY PARTNER ORGANIZATIONS TO OFFER THIS ANNUAL PROGRAMMING, A

MAJORITY OF WHICH HAVE ENGAGED WITH THE PUBLIC FOR ALL OR MOST OF THE

PROGRAM'S DECADE-LONG HISTORY: CHILDREN'S AID (MANHATTAN), THE FORTUNE

SOCIETY (QUEENS), DREAMYARD (BRONX), BROWNSVILLE RECREATION CENTER

(BROOKLYN), DOMESTIC WORKERS UNITED (STATEN ISLAND AND CITYWIDE),

CASITA MARIA CENTER FOR ARTS AND EDUCATION (BRONX), CENTER FOR FAMILY

LIFE IN SUNSET PARK (BROOKLYN), AND MILITARY RESILIENCE FOUNDATION

(CITYWIDE).

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

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AS IS TRADITION, THE CLIMACTIC EXPRESSION OF PUBLIC WORKS IS A

PRODUCTION OF A MUSICAL ADAPTATION OF SHAKESPEARE PERFORMED AT THE

DELACORTE THEATER IN CENTRAL PARK AND FEATURING HUNDREDS OF OUR

COMMUNITY MEMBERS FROM ALL FIVE BOROUGHS. AS DETAILED ABOVE, THE

2022-23 SEASON FEATURED THE TEMPEST AS PART OF THE 2023 SEASON OF FREE

SHAKESPEARE IN THE PARK. IN CENTERING THIS PRODUCTION FOR A FULL RUN ON

OUR LARGEST STAGE, WE SOUGHT TO ASSERT THAT COMMUNITY-BASED WORK IS ONE

OF THE PUBLIC'S HIGHEST PRIORITIES, OFFERING THIS JOYOUS PRODUCTION AS

A VISION FOR WHAT A CITY UNIFIED BY ARTISTICALLY EXCELLENT AND

RADICALLY INCLUSIVE ART MIGHT LOOK LIKE.

PUBLIC SHAKESPEARE INITIATIVE

THE PUBLIC SHAKESPEARE INITIATIVE PRODUCES AND PRESENTS A

MULTIDIMENSIONAL LINEUP OF PROGRAMS, FUELED BY THE BELIEF THAT

SHAKESPEARE IS FOR EVERYONE. THESE INCLUDE: A SERIES OF SCHOLARLY

EXPLORATION AND PERFORMANCE THROUGH PUBLIC SHAKESPEARE PRESENTS AND

INTIMATE PUBLIC SHAKESPEARE TALKS; ARTIST DEVELOPMENT PROGRAMS THAT

ENLIVEN EXPLORATIONS OF SHAKESPEARE WITH THE MOST VISIONARY ARTISTIC

MINDS WORKING TODAY; AND THE HUNTS POINT CHILDREN'S SHAKESPEARE

ENSEMBLE, A TARGETED COMMUNITY ENGAGEMENT PROGRAM IN PARTNERSHIP WITH

THE HUNTS POINT ALLIANCE FOR CHILDREN.

NEW WORK DEVELOPMENT & ANCILLARY PROGRAMS:

EARLY CAREER WORKING GROUPS

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THE PUBLIC'S EARLY CAREER WORKING GROUPS PROVIDE COLLABORATIVE,

EFFECTIVE MODELS FOR SUPPORTING ARTISTS AT CRITICAL STAGES OF THEIR

DEVELOPMENT. THE PRIMARY GOALS OF EACH PROGRAM ARE TO BUILD MEANINGFUL

PATHWAYS FOR ARTISTIC AND PROFESSIONAL ADVANCEMENT:

EMERGING WRITERS GROUP (EWG). FOCUSED ON IDENTIFYING AND SUPPORTING

EARLY CAREER PLAYWRIGHTS, THE EMERGING WRITER'S GROUP PROVIDES KEY

RESOURCES FOR WRITERS AT EVERY STAGE OF THEIR CAREERS. THE PRIMARY GOAL

OF THE EWG PROGRAM IS TO BUILD MEANINGFUL PATHWAYS FOR WRITERS'

ARTISTIC AND PROFESSIONAL DEVELOPMENT. THE NEW WORK DEVELOPMENT TEAM

WORKS TO CREATE A FERTILE COMMUNITY AND FOSTER A WEB OF SUPPORTIVE

ARTISTIC RELATIONSHIPS ACROSS GENERATIONS. WRITERS ARE SELECTED

BI-ANNUALLY AND RECEIVE A TWO-YEAR FELLOWSHIP, WHICH INCLUDES A \$15,000

STIPEND. ELIGIBILITY CRITERIA ARE TAILORED TO SERVE QUALIFIED WRITERS

WHO ARE SHUT OUT OF THE FIELD'S STANDARD PLAY DEVELOPMENT CHANNELS
THOSE WITHOUT PROFESSIONAL REPRESENTATION OR GRADUATE SCHOOL TRAINING.

THE PLAYWRIGHTS PARTICIPATE IN A BI-WEEKLY WRITERS GROUP FEATURING

MASTER CLASSES LED BY ESTABLISHED PLAYWRIGHTS, AND THEIR FELLOWSHIP

CULMINATES IN AN INDUSTRY-INVITED SHOWCASE OF WORK DEVELOPED DURING THE

RESIDENCY.

DEVISED THEATER WORKING GROUP (DTWG). FORMED IN 2014, THE DEVISED

THEATER WORKING GROUP (DTWG) IS AN ARTIST RESOURCE GROUP DESIGNED FOR

MAKERS OF ALL DISCIPLINES, INCLUDING THOSE WHO DO NOT SELF-IDENTIFY AS

THEATER MAKERS BUT FOR WHOM THEATRE IS A POTENT METAPHOR OR FRAMEWORK.

DTWG SERVES AS A THINK TANK TO ENSURE THAT THE PUBLIC IS RESPONSIVE TO

THE MOST IMMEDIATE REALITIES OF INDEPENDENT THEATER MAKING. DTWG OFFERS

NEXT-GENERATION THEATER-MAKERS A SUPPORTIVE FRAMEWORK IN WHICH TO

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

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DEVELOP THEIR WORK, ENGAGE IN CONSISTENT DIALOGUE, AND BE CHALLENGED BY

EACH OTHER'S AESTHETIC PRACTICE. USING THE MODEL OF THE EMERGING

WRITERS GROUP, DTWG CREATES AN INFRASTRUCTURE TO SUPPORT COHORTS OF

BETWEEN EIGHT AND TEN ARTISTS OR PERFORMANCE GROUPS TO MEET

CONSISTENTLY THROUGHOUT THE YEAR AS THEY CREATE THEATER BY OFFERING THE

DRAMATURGICAL, TECHNICAL, ARTISTIC, AND ADMINISTRATIVE RESOURCES OF THE

PUBLIC.

JOE'S PUB WORKING GROUP (JPWG). JOE'S PUB WORKING GROUP (JPWG) IN ORDER

TO CREATE SUSTAINABLE RESOURCES FOR THE FIELD AND TO SUPPORT ARTISTS AT

A CRITICAL POINT IN THEIR CAREERS, DIRECTOR OF JOE'S PUB, ALEX

KNOWLTON, AND ASSOCIATE DIRECTOR OF JOE'S PUB, ISABEL KIM LEAD THE

JOE'S PUB WORKING GROUP, WHICH AIMS TO ENRICH THE SUSTAINABILITY AND

GROWTH OF NEW YORK-BASED EMERGING AND ESTABLISHED ARTISTS' CAREERS BY

PROVIDING ADMINISTRATIVE RESOURCES, PHYSICAL SPACE AND CURATORIAL

SERVICES, FURTHER CULTIVATING A COMMUNITY ATMOSPHERE WHEREIN THOSE

ARTISTS CAN CREATE AND SUSTAIN NEW AND DEVELOPING WORK.

NEW YORK VOICES STARTED FROM A DESIRE TO DIRECTLY ADDRESS THE CRUMBLING

MUSIC INDUSTRY AND THE LACK OF ALBUM SALES, AS WELL AS TO FIND A NEW

WAY TO SUPPORT ARTISTS IN A MANNER UNIQUE TO JOE'S PUB. SINCE ALBUM

SALES ARE A RELIC, WE HAVE COMMITTED TO COMMISSIONING AT LEAST THREE

MUSICIANS PER YEAR AND HELPING THEM TO DEVELOP NEW TOOLS FOR THEIR LIVE

SHOW. AS PART OF THE PUBLIC THEATER'S LONG HISTORY OF CULTIVATING THE

COUNTRY'S MOST CELEBRATED ARTISTS, THROUGH THIS COMMISSION PROGRAM

JOE'S PUB SUPPORTS THE CREATION OF NEW WORKS BY CRITICALLY-ACCLAIMED

MUSICIANS AND PERFORMERS. NEW YORK VOICES ENCOURAGES ARTISTS TO EXPLORE

THEIR STORYTELLING, NARRATIVES AND SONGWRITING PROCESSES, AND INCLUDES

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A VARIETY OF DEVELOPMENTAL AND PRACTICAL RESOURCES. THE PROGRAM

SUCCESSFULLY CONNECTS ARTISTS WITH THEIR CONTEMPORARIES AND

SIGNIFICANTLY EXPANDS THEIR ABILITY TO REACH WIDER AUDIENCES. MANY OF

THE COMMISSIONED WORKS HAVE TOURED NATIONALLY AND INTERNATIONALLY.

ARTISTS-IN-RESIDENCE

THE PUBLIC CONTINUED TO PROVIDE A HOME FOR ARTISTS WHOSE WORKS HAVE SET

THE STANDARD FOR THE HIGHEST LEVEL OF ACHIEVEMENT IN THEATER, FURTHER

SOLIDIFYING AN INFRASTRUCTURE THAT PROVIDES THESE INDIVIDUALS WITH THE

TIME, RESOURCES, AND TOOLS TO CREATE WORKS FOR THE AMERICAN CANON. AS

PART OF THIS, WE OFFER ARTISTS PHYSICAL WRITING SPACE ALONG WITH A

FULL-TIME SALARY AND BENEFITS. THROUGHOUT THE 2022-23 SEASON, WE

CONTINUED TO STEWARD MEANINGFUL ONGOING RELATIONSHIPS WITH THREE

RESIDENT ARTISTS: SUZAN-LORI PARKS, SHAINA TAUB, AND ERIKA

DICKERSON-DESPENZA. THE PUBLIC ALSO COLLABORATED WITH THREE ARTISTS AS

PART OF CREATIVES REBUILD NEW YORK: IFE OLUJOBI, RYAN HADDAD, AND

JULIAN GOLDHAGEN, AND BEGAN THE TWO-YEAR RESIDENCY OF GREG MOZGALA.

EXPENSES \$ 9,396,907. INCLUDING GRANTS OF \$ 568,377. REVENUE \$ 349,408.

FORM 990, PART VI, SECTION A, LINE 1A:

THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE CONSISTING OF THE CHAIR, OTHER OFFICERS OF THE BOARD, THE CHAIRS OF THE AUDIT, FINANCE AND NOMINATING COMMITTEES AND SUCH ADDITIONAL TRUSTEES AS MAY BE ELECTED BY THE BOARD.

THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL THE POWERS OF THE BOARD PERMITTED BY LAW WHEN THE BOARD IS NOT IN SESSION, EXCEPT FOR CERTAIN SPECIFIC MATTERS PURSUANT TO THE ORGANIZATION'S BY-LAWS.

FORM 990, PART VI, SECTION B, LINE 11B:

Name of the organization NEW YORK SHAKESPEARE FESTIVAL

Employer identification number 13-1844852

MANAGEMENT (INCLUDING BUT NOT LIMITED TO THE EXECUTIVE DIRECTOR) REVIEWS

THE FORM 990 WITH THE AUDIT COMMITTEE. AFTER THAT EVALUATION, THE DRAFT 990

IS CIRCULATED TO THE EXECUTIVE COMMITTEE FOR REVIEW AND APPROVAL. THE

PUBLIC VERSION OF THE 990 IS THEN CIRCULATED TO THE FULL BOARD FOR COMMENTS

AND QUESTIONS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THROUGHOUT THE FISCAL YEAR, BOARD MEMBERS ARE REMINDED TO DISCLOSE ANY

CONFLICTS THEY MAY HAVE TO MANAGEMENT OR THE AUDIT COMMITTEE. AT THE END OF
EACH FISCAL YEAR, CONFLICT OF INTEREST FORMS ARE FILLED OUT BY TRUSTEES,
AND THE AUDIT COMMITTEE OR ITS CHAIR EVALUATES THE DISCLOSURES TO DETERMINE
WHETHER THEY INVOLVE MATERIAL CONFLICTS AND MAKES A RECOMMENDATION.

INTERESTED BOARD MEMBERS RECUSE THEMSELVES FROM DISCUSSION AND VOTING
RELATING TO ANY CONFLICTED MATTER. HOWEVER, AS A MEMBER OF THE BOARD OR
COMMITTEE, THE INTERESTED BOARD MEMBER MAY BE COUNTED IN DETERMINING THE
ESTABLISHMENT OF THE QUORUM AT SUCH A MEETING.

AT THIS TIME, ONLY TRUSTEES ARE REQUIRED TO DISCLOSE. A POLICY IS BEING DRAFTED TO REQUIRE THE SAME OF OFFICERS AND KEY EMPLOYEES.

FORM 990, PART VI, SECTION B, LINE 15:

THE ARTISTIC DIRECTOR'S CONTRACT WAS RENEWED EFFECTIVE JUNE 2018 AND RUNS
THROUGH JULY 2028. THE EXECUTIVE DIRECTOR'S CONTRACT WAS RENEWED IN

JANUARY 2022 AND RUNS THROUGH DECEMBER 2025. THE EXECUTIVE COMMITTEE

RECEIVED A REPORT FROM AN INDEPENDENT CONSULTANT WITH COMPARATIVE DATA FROM
PEER CULTURAL INSTITUTIONS IN BUDGET AND PROGRAM SIZE IN NEW YORK CITY AND
ACROSS THE COUNTRY. USING THIS DATA, THE COMMITTEE DETERMINED A COMPARABLE
COMPENSATION LEVEL.

Name of the organization **Employer identification number** NEW YORK SHAKESPEARE FESTIVAL 13-1844852 FOR THE KEY POSITIONS OF PRODUCTION EXECUTIVE, CHIEF ADVANCEMENT OFFICER, CHIEF FINANCIAL OFFICER, MANAGING DIRECTOR AND CHIEF MARKETING OFFICER, THE SENIOR DIRECTOR OF HUMAN RESOURCES AND/OR INDEPENDENT CONSULTANT GARNERS INFORMATION USING COMPARATIVE DATA FROM SIMILARLY-SIZED, NONPROFIT ARTS INSTITUTIONS. THE INFORMATION IS CULLED FROM FORM 990S AND FROM INDUSTRY SURVEYS. USING THIS DATA, THE EXECUTIVE DIRECTOR AND HR DETERMINE COMPENSATION. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: NY, NJ, PA, CA, GA, FL, IL, MA, MI, MN, RI, VA, CO, CT, WA, DC, AZ, DE, ID, IN, IA, MT, NE, SD, UT VT,WY FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: PENSION-RELATED CHANGES OTHER THAN PERIODIC PENSION COST 242,893.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

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(a)	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)				Direct c	ontrolling ntity	9
	_							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	cations. Complete if the organization	on answered "Yes" on Form 99	0, Part IV, line 34,	because it had one	e or more	related tax-exe	empt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) et controlling entity		g) 512(b)(13) rolled ity?
				501(c)(3))			Yes	No
THE SHAKESPEARE SOCIETY OF AMERICA, INC	INCREASING ENJOYMENT,							
13-3974836, 425 LAFAYETTE STREET, NEW YORK, NY 10003	UNDERSTANDING, AND APPRECIATION OF	NEW YORK	501(C)(3)	509(A)(2)	YES		x	
	_							

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

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

IDI Gene	eral or Phaging ther?	(k) Percentage ownership
1065) Yes	s No l	
- I 1	9	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(l contr ent	tion b)(13) rolled tity?
		country)		or trust)		855615		Yes	No
PUBLIC THEATER PRODUCTIONS - 26-3803813									
425 LAFAYETTE STREET	COMMERCIAL THEATER								
NEW YORK, NY 10003	CO-PRODUCTIONS	NY	N/A	C CORP	0.	101,341.	100%	X	
	1								
	1								

Page 3

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

Note	c: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions with or	ne or more r	elated organizations listed	in Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X		
b	Gift, grant, or capital contribution to related organization(s)				1b	X			
С	Gift, grant, or capital contribution from related organization(s)				1c	Х			
d	Loans or loan guarantees to or for related organization(s)				1d		X		
	Loans or loan guarantees by related organization(s)				1e		X		
f	Dividends from related organization(s)				1f		X		
g	Sale of assets to related organization(s)				1g		Х		
	Purchase of assets from related organization(s)				1h		Х		
i	Exchange of assets with related organization(s)				1i		Х		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х		
	Performance of services or membership or fundraising solicitations for related organization				11	Х			
	Performance of services or membership or fundraising solicitations by related organization(1m		Х		
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
	o Sharing of paid employees with related organization(s)								
р	p Reimbursement paid to related organization(s) for expenses								
	q Reimbursement paid by related organization(s) for expenses								
r	Other transfer of cash or property to related organization(s)				1r		Х		
s	Other transfer of cash or property from related organization(s)				1s		Х		
	If the answer to any of the above is "Yes," see the instructions for information on who must								
	(a)	(b)	(c)	(d)					
	Name of related organization Trans	nsaction	Amount involved	Method of determining amount inv	olved				
	typ	pe (a-s)							
(1) [THE SHAKESPEARE SOCIETY OF AMERICA, INC.	В	542,377.	AMOUNT OF GRANT TO THE S	SOCI	ETY			
(2) [THE SHAKESPEARE SOCIETY OF AMERICA, INC.	Q	542,377.	REIMBURSEMENT FROM THE S	SOCI	ETY			
(3)									
(4)									
(5)									
(6)		F 0							

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e)	(f)	(g)	(ŀ	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related unrelated	partners se	Share of	Share of	Dispr	opor- ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managi	or Percentage
of entity		(state or foreign country)	excluded from tax under	orgs.?	total income	end-of-year assets	allocat	ions?	of Schedule K-1	partner	ownership
		Country)	Sections 5 (2-5 (4)	Yes No	income	assets	Yes	No	(F01111 1065)	Yes N	0
										\vdash	
										$\sqcup \bot$	
]	1			1		1			1	1