

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the 2017 calendar year, or tax year beginning **SEP 1, 2017** and ending **AUG 31, 2018**

|   |   |   |
|---|---|---|
| <b>B</b> Check if applicable:   | <b>C</b> Name of organization<br><b>NEW YORK SHAKESPEARE FESTIVAL</b>   | <b>D</b> Employer identification number<br><b>13-1844852</b>  |
| <input type="checkbox"/> Address change   | Doing business as <b>THE PUBLIC THEATER; JOE'S PUB</b>  | <b>E</b> Telephone number<br><b>(212) 539-8500</b>  |
| <input type="checkbox"/> Name change  | Number and street (or P.O. box if mail is not delivered to street address) Room/suite<br><b>425 LAFAYETTE STREET</b>  |   |
| <input type="checkbox"/> Initial return   | City or town, state or province, country, and ZIP or foreign postal code<br><b>NEW YORK, NY 10003</b>   | <b>G</b> Gross receipts \$ <b>70,084,111.</b>   |
| <input type="checkbox"/> Final return/terminated  | <b>F</b> Name and address of principal officer: <b>PATRICK WILLINGHAM</b><br><b>SAME AS C ABOVE</b>   | <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                          |
| <input type="checkbox"/> Amended return   |   | <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list. (see instructions) |
| <input type="checkbox"/> Application pending  | <b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | <b>H(c)</b> Group exemption number ▶  |
| <b>J</b> Website: ▶ <b>WWW.PUBLICTHEATER.ORG</b>  |   |   |
| <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ |   | <b>L</b> Year of formation: <b>1954</b> <b>M</b> State of legal domicile: <b>NY</b>   |

**Part I Summary**

|  |   |             |                           |              |
|--|---|-------------|---------------------------|--------------|
|  | 1 Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>                                       |             |                           |              |
| Activities & Governance  | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. |             |                           |              |
|  | 3 Number of voting members of the governing body (Part VI, line 1a)   | 3           |                           | 43           |
|  | 4 Number of independent voting members of the governing body (Part VI, line 1b)   | 4           |                           | 41           |
|  | 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)  | 5           |                           | 1287         |
|  | 6 Total number of volunteers (estimate if necessary)  | 6           |                           | 65           |
|  | 7a Total unrelated business revenue from Part VIII, column (C), line 12   | 7a          |                           | 11,806.      |
|  | b Net unrelated business taxable income from Form 990-T, line 34  | 7b          |                           | 138,718.     |
| Revenue  | 8 Contributions and grants (Part VIII, line 1h)   |             | Prior Year                | Current Year |
|  | 9 Program service revenue (Part VIII, line 2g)  |             | 26,656,819.               | 34,253,715.  |
|  | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)  |             | 13,131,527.               | 11,029,374.  |
|  | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |             | 851,753.                  | 1,280,634.   |
|  | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   |             | 13,372,831.               | 21,564,698.  |
|  |   |             | 54,012,930.               | 68,128,421.  |
| Expenses   | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)   |             | 65,535.                   | 861,577.     |
|  | 14 Benefits paid to or for members (Part IX, column (A), line 4)  |             | 0.                        | 0.           |
|  | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  |             | 25,919,423.               | 29,261,143.  |
|  | 16a Professional fundraising fees (Part IX, column (A), line 11e)   |             | 225,000.                  | 518,092.     |
|  | b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>4,674,022.</b>   |             |                           |              |
|  | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   |             | 16,824,894.               | 18,141,217.  |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) |   | 43,034,852. | 48,782,029.               |              |
| 19 Revenue less expenses. Subtract line 18 from line 12                      |   | 10,978,078. | 19,346,392.               |              |
| Net Assets or Fund Balances  | 20 Total assets (Part X, line 16)   |             | Beginning of Current Year | End of Year  |
|  | 21 Total liabilities (Part X, line 26)  |             | 62,271,935.               | 85,134,061.  |
|  | 22 Net assets or fund balances. Subtract line 21 from line 20   |             | 5,472,917.                | 11,491,835.  |
|  |   | 56,799,018. | 73,642,226.               |              |

**Part II Signature Block**

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

|                               |   |                                |
|-------------------------------|---|--------------------------------|
| <b>Sign Here</b>              | ▶<br>Signature of officer   | ▶ <b>6-6-2019</b><br>Date      |
| <b>Paid Preparer Use Only</b> | ▶ <b>PATRICIA HUIE, CHIEF FINANCIAL OFFICER</b><br>Type or print name and title |                                |
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br><b>MICHAEL WALLACE</b>                            | Preparer's signature           |
|                               | Firm's name ▶ <b>LUTZ AND CARR, CPAS LLP</b>                                    | Firm's EIN ▶ <b>13-1655065</b> |
|                               | Firm's address ▶ <b>551 FIFTH AVENUE, SUITE 400<br/>NEW YORK, NY 10176</b>      | Phone no. <b>212-697-2299</b>  |

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: AS THE NATION'S FOREMOST PRODUCER OF SHAKESPEARE AND NEW WORK, THE PUBLIC THEATER IS DEDICATED TO ACHIEVING ARTISTIC EXCELLENCE WHILE DEVELOPING AN AMERICAN THEATER THAT IS ACCESSIBLE AND RELEVANT TO ALL PEOPLE THROUGH PRODUCTIONS OF CHALLENGING NEW PLAYS, MUSICALS AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes [ ] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 19,586,283. including grants of \$ ) (Revenue \$ 8,039,397.) DOWNTOWN SEASON

THE PUBLIC THEATER'S MAINSTAGE SEASON AT 425 LAFAYETTE STREET FEATURES A DIVERSE LINE-UP OF NEW PLAYS AND MUSICALS, AS WELL AS SHAKESPEARE AND OTHER CLASSICS, IN FIVE THEATERS. THE DOWNTOWN PROGRAMMING AIMS TO PRESENT THE MOST PRESSING ISSUES OF THE TIME, AS TOLD BY THE FIELD'S MOST CUTTING-EDGE VOICES, TO THE BROADEST POSSIBLE AUDIENCE.

FOUR PLAYS RECEIVED THEIR WORLD PREMIERE - RICHARD NELSON'S ILLYRIA; SARAH BURGESS' KINGS; AND LYNN NOTTAGE'S MLIMA'S TALE.

4b (Code: ) (Expenses \$ 6,917,584. including grants of \$ ) (Revenue \$ ) SHAKESPEARE IN THE PARK

FREE SHAKESPEARE IN THE PARK AT THE DELACORTE THEATER IN CENTRAL PARK EMBODIES THE PUBLIC THEATER'S MISSION TO OFFER THE HIGHEST QUALITY WORK TO EVERYONE, FREE OF CHARGE. SINCE ITS INCEPTION MORE THAN 5 MILLION PEOPLE HAVE ENJOYED PERFORMANCES BY BOTH EMERGING AND WORLD-RENOWNED ARTISTS. CONTINUING A LONG-HELD TRADITION, ALL TICKETS FOR SHAKESPEARE IN THE PARK ARE OFFERED FREE OF CHARGE THROUGH A VARIETY OF DISTRIBUTION METHODS IN ALL FIVE BOROUGHES DESIGNED TO MAXIMIZE ACCESSIBILITY. FOR PATRONS WITH HEARING AND VISION IMPAIRMENTS, THE PUBLIC THEATER OFFERS A SIGN-INTERPRETED, OPEN-CAPTIONED AND AUDIO-DESCRIBED PERFORMANCE FOR EACH PRODUCTION.

4c (Code: ) (Expenses \$ 4,378,481. including grants of \$ ) (Revenue \$ 3,008,044.) JOE'S PUB

ONE OF NEW YORK CITY'S MOST CELEBRATED VENUES FOR EMERGING AND ESTABLISHED PERFORMANCE ARTISTS, JOE'S PUB IS COMMITTED TO REFLECTING THE DIVERSE COMMUNITY THAT IT REPRESENTS IN ITS AUDIENCE AND ON ITS STAGE BY PROGRAMMING A VARIETY OF HIGH-QUALITY PERFORMANCES, WHILE KEEPING TICKET PRICES AT A MINIMUM. NAMED FOR PUBLIC THEATER FOUNDER JOE PAPP, JOE'S PUB DEBUTED IN 1998 AND PLAYS A VITAL ROLE IN THE PUBLIC THEATER'S MISSION OF SUPPORTING YOUNG ARTISTS WHILE PROVIDING ESTABLISHED ARTISTS WITH AN INTIMATE SPACE TO PERFORM AND DEVELOP NEW WORK. AS PART OF THE PUBLIC THEATER'S 2017-18 PROGRAMMING DOWNTOWN AT 425 LAFAYETTE STREET, JOE'S PUB PRESENTED TALENT FROM ALL OVER THE

4d Other program services (Describe in Schedule O.) (Expenses \$ 8,516,601. including grants of \$ 861,577.) (Revenue \$ 594,437.)

4e Total program service expenses 39,398,949.

**Part IV Checklist of Required Schedules**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?<br><i>If "Yes," complete Schedule A</i> .....  | X   |    |
| <b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....   | X   |    |
| <b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....  |     | X  |
| <b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....  | X   |    |
| <b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....   |     | X  |
| <b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....  |     | X  |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....  |     | X  |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....   |     | X  |
| <b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....            |     | X  |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....   | X   |    |
| <b>11</b> 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.   |     |    |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....   | X   |    |
| <b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....   | X   |    |
| <b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....   |     | X  |
| <b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....  |     | X  |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....   | X   |    |
| <b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....  |     | X  |
| <b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....  |     | X  |
| <b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year?<br><i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....  | X   |    |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....  |     | X  |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....  |     | X  |
| <b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> ..... |     | X  |
| <b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....   |     | X  |
| <b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....   |     | X  |
| <b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i> .....   | X   |    |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....   | X   |    |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....   |     | X  |

**Part IV Checklist of Required Schedules** (continued)

|  | Yes | No |
|--|-----|----|
| <b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....  |     | X  |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....  |     |    |
| <b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....   | X   |    |
| <b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....   | X   |    |
| <b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....  | X   |    |
| <b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....                           |     | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....   |     |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....  |     |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....   |     |    |
| <b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....  |     | X  |
| <b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....  |     | X  |
| <b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....                                 |     | X  |
| <b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> ..... |     | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  |     |    |
| <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....  |     | X  |
| <b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....   |     | X  |
| <b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....   |     | X  |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....  | X   |    |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....  |     | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....  |     | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....  |     | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....  |     | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....  | X   |    |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....   | X   |    |
| <b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....  | X   |    |
| <b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....   |     | X  |
| <b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....   |     | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....   | X   |    |

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Table with columns for question number, description, and Yes/No checkboxes. Includes rows for backup withholding, employee counts, foreign accounts, and charitable contributions.

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 in Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (43); 1b Enter the number of voting members included in line 1a, above, who are independent (41); 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? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? (X).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY, CT, NJ, PA, CA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [X] Another's website [X] Upon request [ ] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: DANIEL WILLIAMS, DIR OF FINANCE - 212-539-8500 425 LAFAYETTE STREET, NEW YORK, NY 10003

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

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

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

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

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

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

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

| (A)<br>Name and Title                      | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |   | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (1) ARIELLE TEPPER MADOVER<br>CHAIR        | 10.00   | X   |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (2) PAT FILI-KRUSHEL<br>VICE CHAIR         | 4.00  | X   |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (3) ANNE CLARKE WOLFF<br>TREASURER         | 4.00  | X   |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (4) MATTHEW PINCUS<br>SECRETARY            | 4.00  | X   |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (5) KWAME ANTHONY APPIAH<br>BOARD MEMBER   | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (6) PATTY BAKER<br>BOARD MEMBER            | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (7) RENEE BEAUMONT<br>BOARD MEMBER         | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (8) ANDREA E. BERNSTEIN<br>BOARD MEMBER    | 2.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (9) JASON BLUM<br>BOARD MEMBER             | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (10) ZACH BUCHWALD<br>BOARD MEMBER         | 2.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (11) GORDON J. DAVIS, ESQ.<br>BOARD MEMBER | 2.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (12) DAVID DROGA<br>BOARD MEMBER           | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (13) SUSAN EDELSTEIN<br>BOARD MEMBER       | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (14) ERIC ELLENBOGEN<br>BOARD MEMBER       | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (15) HILARY C. FESHBACH<br>BOARD MEMBER    | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (16) CANDIA FISHER<br>BOARD MEMBER         | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (17) FAITH GAY<br>BOARD MEMBER             | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |

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

| (A)<br>Name and title  | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |   | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (18) DANAI GURIRA<br>BOARD MEMBER                              | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (19) ANNE HATHAWAY<br>BOARD MEMBER                             | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (20) DEBBY LANDESMAN<br>BOARD MEMBER                           | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (21) ASHLEY LEEDS<br>BOARD MEMBER                              | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (22) KENNY LEON<br>BOARD MEMBER                                | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (23) BARBARA MANOCHERIAN (THRU 9/17)<br>BOARD MEMBER           | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (24) LUIS MIRANDA JR.<br>BOARD MEMBER                          | 2.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (25) GAIL MERRIFIELD PAPP<br>BOARD MEMBER                      | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (26) JULIA PERSHAN<br>BOARD MEMBER                             | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| <b>1b Sub-total</b>  |   |   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| <b>c Total from continuation sheets to Part VII, Section A</b> |   |   |                       |         |              |                              |        | 2,639,865.   | 0.  | 305,178.  |
| <b>d Total (add lines 1b and 1c)</b>                           |   |   |                       |         |              |                              |        | 2,639,865.   | 0.  | 305,178.  |

**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 **28**

|   | Yes | No |
|---|-----|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual                                       | X   |    |
| <b>4</b> 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 | X   |    |
| <b>5</b> 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                       |     | 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)<br>Name and business address   | (B)<br>Description of services           | (C)<br>Compensation |
|--|--|---------------------|
| ENNEAD ARCHITECTS LLP<br>320 WEST 13TH STREET, NEW YORK, NY 10014            | ARCHITECTURE AND DESIGN SERVICES         | 593,962.            |
| PRODUCTION RESOURCE GROUP, LLC<br>PO BOX 5115, NEW YORK, NY 10087            | THEATRICAL EQUIPMENT RENTALS AND PURCHAS | 521,821.            |
| MASQUE SOUND & RECORDING CORP., 21 EAST UNION AVE, EAST RUTHERFORD, NJ 07073 | THEATRICAL EQUIPMENT RENTALS AND PURCHAS | 508,732.            |
| CSS SECURITY, 2753 NORTH JERUSALEM AVENUE SUITE D, EAST MEADOW, NY 11554     | FACILITY SECURITY SERVICES               | 447,466.            |
| JOE'S PUBLIC, LLC<br>425 LAFAYETTE STREET, NEW YORK, NY 10003                | CATERING SERVICES                        | 383,943.            |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **29**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

| (A)<br>Name and title                               | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position (check all that apply) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---|---|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|   |   | Individual trustee or director         | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (27) JULIO PETERSON<br>BOARD MEMBER                 | 2.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (28) LISA GARCIA QUIROZ (THRU 3/18)<br>BOARD MEMBER | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (29) CHARLOTTE RELYEA<br>BOARD MEMBER               | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (30) JULIE RICE<br>BOARD MEMBER                     | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (31) WENDI ROSE<br>BOARD MEMBER                     | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (32) LIZANNE ROSENSTEIN<br>BOARD MEMBER             | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (33) MARK ROSENTHAL<br>BOARD MEMBER                 | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (34) LIEV SCHREIBER (THRU 10/17)<br>BOARD MEMBER    | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (35) ALEXANDRA SHIVA<br>BOARD MEMBER                | 2.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (36) JIM STEINBERG<br>BOARD MEMBER                  | 2.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (37) STEVEN TAUB<br>BOARD MEMBER                    | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (38) TERESA TSAI<br>BOARD MEMBER                    | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (39) GRACE LYU-VOLCKHAUSEN<br>BOARD MEMBER          | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (40) SAM WATERSTON<br>BOARD MEMBER                  | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (41) AUDREY WILF<br>BOARD MEMBER                    | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (42) TIMOTHY WILKINS<br>BOARD MEMBER                | 2.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (43) FRANCES WILKINSON<br>BOARD MEMBER              | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (44) ALISA AMAROSA WOOD<br>BOARD MEMBER             | 1.00  | X                                      |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (45) PATRICK WILLINGHAM<br>EXECUTIVE DIRECTOR       | 40.00   | X                                      |                       | X       |              |                              |        | 391,228.   | 0.  | 24,869.   |
| (46) PAUL J EUSTIS<br>ARTISTIC DIRECTOR             | 40.00   | X                                      |                       | X       |              |                              |        | 591,208.   | 0.  | 67,578.   |
| Total to Part VII, Section A, line 1c .....         |   |  |                       |         |              |                              |        |  |   |   |



**Part VIII Statement of Revenue**

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

|  |  |   | (A)                  | (B)                                | (C)                        | (D)  |         |
|--|--|---|----------------------|------------------------------------|----------------------------|--|---------|
|  |  |   | Total revenue        | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 |         |
| <b>Contributions, Gifts, Grants and Other Similar Amounts</b>        | <b>1 a</b> Federated campaigns   | <b>1a</b>   |                      |                                    |                            |  |         |
|  | <b>b</b> Membership dues   | <b>1b</b>   |                      |                                    |                            |  |         |
|  | <b>c</b> Fundraising events  | <b>1c</b>   | 3,046,883.           |                                    |                            |  |         |
|  | <b>d</b> Related organizations   | <b>1d</b>   |                      |                                    |                            |  |         |
|  | <b>e</b> Government grants (contributions)   | <b>1e</b>   | 901,301.             |                                    |                            |  |         |
|  | <b>f</b> All other contributions, gifts, grants, and similar amounts not included above  | <b>1f</b>   | 30,305,531.          |                                    |                            |  |         |
|  | <b>g</b> Noncash contributions included in lines 1a-1f: \$   |   | 222,583.             |                                    |                            |  |         |
|  | <b>h Total.</b> Add lines 1a-1f  |   | 34,253,715.          |                                    |                            |  |         |
|  | <b>Program Service Revenue</b>   | <b>2 a</b> BOX OFFICE INCOME  | <b>Business Code</b> | 711110                             | 10,308,553.                | 10,308,553.  |         |
| <b>b</b> CO-PRODUCTION FEES, ENHANCEMENT I                           |  |   | 900099               | 699,821.                           | 699,821.                   |  |         |
| <b>c</b> WORKSHOPS/EVENTS  |  |   | 900099               | 21,000.                            | 21,000.                    |  |         |
| <b>d</b>   |  |   |                      |                                    |                            |  |         |
| <b>e</b>   |  |   |                      |                                    |                            |  |         |
| <b>f</b> All other program service revenue                           |  |   |                      |                                    |                            |  |         |
| <b>g Total.</b> Add lines 2a-2f                                      |  |   |                      | 11,029,374.                        |                            |  |         |
| <b>Other Revenue</b>   |  | <b>3</b> Investment income (including dividends, interest, and other similar amounts) |                      |                                    | 417,689.                   |  | 11,806. |
|  | <b>4</b> Income from investment of tax-exempt bond proceeds  |   |                      |                                    |                            |  |         |
|  | <b>5</b> Royalties   |   |                      | 20,432,920.                        |                            | 20,432,920.  |         |
|  | <b>6 a</b> Gross rents   | (i) Real  | 519,274.             |                                    |                            |  |         |
|  |  | (ii) Personal   |                      |                                    |                            |  |         |
|  |  | Less: rental expenses   | 0.                   |                                    |                            |  |         |
|  | <b>c</b> Rental income or (loss)   |   | 519,274.             |                                    |                            |  |         |
|  | <b>d</b> Net rental income or (loss)   |   |                      | 519,274.                           |                            | 519,274.   |         |
|  | <b>7 a</b> Gross amount from sales of assets other than inventory  | (i) Securities  | 2,589,237.           |                                    |                            |  |         |
|  |  | (ii) Other  |                      |                                    |                            |  |         |
|  |  | Less: cost or other basis and sales expenses  | 1,726,292.           |                                    |                            |  |         |
|  |  | <b>c</b> Gain or (loss)   |                      | 862,945.                           |                            |  |         |
|  | <b>d</b> Net gain or (loss)  |   |                      | 862,945.                           |                            | 862,945.   |         |
|  | <b>8 a</b> Gross income from fundraising events (not including \$ 3,046,883. of contributions reported on line 1c). See Part IV, line 18 | <b>a</b>  | 229,398.             |                                    |                            |  |         |
|  |  | <b>b</b> Less: direct expenses  | 229,398.             |                                    |                            |  |         |
| <b>c</b> Net income or (loss) from fundraising events                |  |   |                      | 0.                                 |                            |  |         |
| <b>9 a</b> Gross income from gaming activities. See Part IV, line 19 | <b>a</b>   |   |                      |                                    |                            |  |         |
|  | <b>b</b> Less: direct expenses   |   |                      |                                    |                            |  |         |
|  | <b>c</b> Net income or (loss) from gaming activities   |   |                      |                                    |                            |  |         |
| <b>10 a</b> Gross sales of inventory, less returns and allowances    | <b>a</b>   |   |                      |                                    |                            |  |         |
|  | <b>b</b> Less: cost of goods sold  |   |                      |                                    |                            |  |         |
|  | <b>c</b> Net income or (loss) from sales of inventory  |   |                      |                                    |                            |  |         |
| <b>Miscellaneous Revenue</b>   |  | <b>Business Code</b>  |                      |                                    |                            |  |         |
| <b>11 a</b> MISCELLANEOUS INCOME                                     |  | 900099  | 612,504.             | 612,504.                           |                            |  |         |
| <b>b</b>   |  |   |                      |                                    |                            |  |         |
| <b>c</b>   |  |   |                      |                                    |                            |  |         |
| <b>d</b> All other revenue   |  |   |                      |                                    |                            |  |         |
| <b>e Total.</b> Add lines 11a-11d                                    |  |   | 612,504.             |                                    |                            |  |         |
| <b>12 Total revenue.</b> See instructions.                           |  |   | 68,128,421.          | 11,641,878.                        | 11,806.                    | 22,221,022.  |         |

**Part IX Statement of Functional Expenses**

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

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

| <i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>   | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21  | 735,227.              | 735,227.                        |  |                             |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22   | 126,350.              | 126,350.                        |  |                             |
| 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  | 2,245,882.            | 1,819,872.                      | 230,540.                               | 195,470.                    |
| 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  | 22,354,741.           | 18,114,385.                     | 2,294,713.                             | 1,945,643.                  |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  | 1,260,876.            | 1,021,707.                      | 129,430.                               | 109,739.                    |
| 9 Other employee benefits   | 1,855,655.            | 1,503,666.                      | 190,482.                               | 161,507.                    |
| 10 Payroll taxes  | 1,543,989.            | 1,251,118.                      | 158,490.                               | 134,381.                    |
| 11 Fees for services (non-employees):   |                       |                                 |  |                             |
| a Management  | 813,634.              | 419,821.                        | 367,370.                               | 26,443.                     |
| b Legal   | 261,110.              | 182,838.                        | 78,272.                                |                             |
| c Accounting  | 73,363.               | 1,500.                          | 71,863.                                |                             |
| d Lobbying  | 45,000.               |                                 | 45,000.                                |                             |
| e Professional fundraising services. See Part IV, line 17   | 518,092.              |                                 |  | 518,092.                    |
| f Investment management fees  |                       |                                 |  |                             |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)   | 3,752,096.            | 3,684,189.                      |  | 67,907.                     |
| 12 Advertising and promotion  | 1,599,916.            | 1,080,830.                      | 11,145.                                | 507,941.                    |
| 13 Office expenses  | 1,101,912.            | 690,670.                        | 297,207.                               | 114,035.                    |
| 14 Information technology   | 343,996.              | 209,193.                        | 112,888.                               | 21,915.                     |
| 15 Royalties  | 386,195.              | 380,812.                        |  | 5,383.                      |
| 16 Occupancy  | 1,784,816.            | 1,491,916.                      | 215,981.                               | 76,919.                     |
| 17 Travel   | 2,427,742.            | 1,712,863.                      | 98,255.                                | 616,624.                    |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials   |                       |                                 |  |                             |
| 19 Conferences, conventions, and meetings   | 234,545.              | 106,142.                        | 67,672.                                | 60,731.                     |
| 20 Interest   |                       |                                 |  |                             |
| 21 Payments to affiliates   |                       |                                 |  |                             |
| 22 Depreciation, depletion, and amortization  | 1,068,109.            | 709,027.                        | 283,426.                               | 75,656.                     |
| 23 Insurance  | 106,795.              | 60,673.                         | 26,791.                                | 19,331.                     |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) |                       |                                 |  |                             |
| a <b>PRODUCTION COSTS</b>   | 3,992,738.            | 3,991,046.                      | 1,266.                                 | 426.                        |
| b <b>MISCELLANEOUS</b>  | 146,045.              | 105,104.                        | 25,062.                                | 15,879.                     |
| c <b>BAD DEBT</b>   | 3,205.                |                                 | 3,205.                                 |                             |
| d   |                       |                                 |  |                             |
| e All other expenses  |                       |                                 |  |                             |
| <b>25 Total functional expenses.</b> Add lines 1 through 24e  | <b>48,782,029.</b>    | <b>39,398,949.</b>              | <b>4,709,058.</b>                      | <b>4,674,022.</b>           |
| <b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.                              |                       |                                 |  |                             |

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

|   |  | (A)                    |             | (B)         |             |
|---|--|------------------------|-------------|-------------|-------------|
|   |  | Beginning of year      |             | End of year |             |
| <b>Assets</b>   | <b>1</b> Cash - non-interest-bearing .....   | 861,461.               | <b>1</b>    | 2,957,388.  |             |
|   | <b>2</b> Savings and temporary cash investments .....  | 13,144,598.            | <b>2</b>    | 29,296,778. |             |
|   | <b>3</b> Pledges and grants receivable, net .....  | 8,616,079.             | <b>3</b>    | 11,782,418. |             |
|   | <b>4</b> Accounts receivable, net .....  | 2,568,712.             | <b>4</b>    | 1,450,569.  |             |
|   | <b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....   |                        | <b>5</b>    |             |             |
|   | <b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L ..... |                        | <b>6</b>    |             |             |
|   | <b>7</b> Notes and loans receivable, net .....   |                        | <b>7</b>    |             |             |
|   | <b>8</b> Inventories for sale or use .....   |                        | <b>8</b>    |             |             |
|   | <b>9</b> Prepaid expenses and deferred charges .....   | 1,210,121.             | <b>9</b>    | 1,886,200.  |             |
|   | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....   | <b>10a</b> 22,461,362. |             |             |             |
|   | <b>b</b> Less: accumulated depreciation .....  | <b>10b</b> 7,900,407.  | 14,872,147. | <b>10c</b>  | 14,560,955. |
|   | <b>11</b> Investments - publicly traded securities .....   | 12,451,493.            | <b>11</b>   | 13,835,231. |             |
|   | <b>12</b> Investments - other securities. See Part IV, line 11 .....   | 7,486,023.             | <b>12</b>   | 6,653,996.  |             |
|   | <b>13</b> Investments - program-related. See Part IV, line 11 .....  |                        | <b>13</b>   |             |             |
|   | <b>14</b> Intangible assets .....  |                        | <b>14</b>   |             |             |
|   | <b>15</b> Other assets. See Part IV, line 11 .....   | 1,061,301.             | <b>15</b>   | 2,710,526.  |             |
| <b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) ..... | 62,271,935.  | <b>16</b>              | 85,134,061. |             |             |
| <b>Liabilities</b>  | <b>17</b> Accounts payable and accrued expenses .....  | 1,908,782.             | <b>17</b>   | 3,441,222.  |             |
|   | <b>18</b> Grants payable .....   |                        | <b>18</b>   |             |             |
|   | <b>19</b> Deferred revenue .....   | 1,570,479.             | <b>19</b>   | 3,412,983.  |             |
|   | <b>20</b> Tax-exempt bond liabilities .....  |                        | <b>20</b>   |             |             |
|   | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....  |                        | <b>21</b>   |             |             |
|   | <b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....   |                        | <b>22</b>   |             |             |
|   | <b>23</b> Secured mortgages and notes payable to unrelated third parties .....   |                        | <b>23</b>   |             |             |
|   | <b>24</b> Unsecured notes and loans payable to unrelated third parties .....   |                        | <b>24</b>   |             |             |
|   | <b>25</b> 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 .....  | 1,993,656.             | <b>25</b>   | 4,637,630.  |             |
|   | <b>26 Total liabilities.</b> Add lines 17 through 25 .....   | 5,472,917.             | <b>26</b>   | 11,491,835. |             |
| <b>Net Assets or Fund Balances</b>  | <b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>  |                        |             |             |             |
|   | <b>27</b> Unrestricted net assets .....  | 17,720,079.            | <b>27</b>   | 31,153,730. |             |
|   | <b>28</b> Temporarily restricted net assets .....  | 23,657,294.            | <b>28</b>   | 27,066,851. |             |
|   | <b>29</b> Permanently restricted net assets .....  | 15,421,645.            | <b>29</b>   | 15,421,645. |             |
|   | <b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>   |                        |             |             |             |
|   | <b>30</b> Capital stock or trust principal, or current funds .....   |                        | <b>30</b>   |             |             |
|   | <b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....   |                        | <b>31</b>   |             |             |
|   | <b>32</b> Retained earnings, endowment, accumulated income, or other funds .....   |                        | <b>32</b>   |             |             |
| <b>33</b> Total net assets or fund balances .....                         | 56,799,018.  | <b>33</b>              | 73,642,226. |             |             |
| <b>34</b> Total liabilities and net assets/fund balances .....            | 62,271,935.  | <b>34</b>              | 85,134,061. |             |             |

**Part XI Reconciliation of Net Assets**

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

|    |  |    |             |
|----|--|----|-------------|
| 1  | Total revenue (must equal Part VIII, column (A), line 12)  | 1  | 68,128,421. |
| 2  | Total expenses (must equal Part IX, column (A), line 25)   | 2  | 48,782,029. |
| 3  | Revenue less expenses. Subtract line 2 from line 1   | 3  | 19,346,392. |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | 4  | 56,799,018. |
| 5  | Net unrealized gains (losses) on investments   | 5  | 182,368.    |
| 6  | Donated services and use of facilities   | 6  |             |
| 7  | Investment expenses  | 7  |             |
| 8  | Prior period adjustments   | 8  |             |
| 9  | Other changes in net assets or fund balances (explain in Schedule O)   | 9  | -2,685,552. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 73,642,226. |

**Part XII Financial Statements and Reporting**

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

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

Form 990 (2017)



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

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

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶  | (a) 2013  | (b) 2014  | (c) 2015  | (d) 2016  | (e) 2017  | (f) Total |
|--|-----------|-----------|-----------|-----------|-----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....  | 23983629. | 27916624. | 19140017. | 26656819. | 33560688. | 131257777 |
| <b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....   |           |           |           |           |           |           |
| <b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....   |           |           |           |           |           |           |
| <b>4 Total.</b> Add lines 1 through 3 .....  | 23983629. | 27916624. | 19140017. | 26656819. | 33560688. | 131257777 |
| <b>5</b> 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) ..... |           |           |           |           |           | 3535327.  |
| <b>6 Public support.</b> Subtract line 5 from line 4.  |           |           |           |           |           | 127722450 |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶  | (a) 2013  | (b) 2014  | (c) 2015  | (d) 2016  | (e) 2017       | (f) Total                |
|--|-----------|-----------|-----------|-----------|----------------|--------------------------|
| <b>7</b> Amounts from line 4 .....   | 23983629. | 27916624. | 19140017. | 26656819. | 33560688.      | 131257777                |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....   | 1152449.  | 1322675.  | 3608284.  | 13454275. | 21358077.      | 40895760.                |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....  | 2,221.    | 3,140.    | 3,909.    | 11,025.   | 10,806.        | 31,101.                  |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....  | 282,768.  | 380,275.  | 213,358.  | 310,123.  | 612,504.       | 1799028.                 |
| <b>11 Total support.</b> Add lines 7 through 10  |           |           |           |           |                | 173983666                |
| <b>12</b> Gross receipts from related activities, etc. (see instructions) .....  |           |           |           |           | 12 53,460,814. |                          |
| <b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ..... |           |           |           |           |                | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|   |                                     |         |
|---|-------------------------------------|---------|
| <b>14</b> Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) .....  | <b>14</b>                           | 73.41 % |
| <b>15</b> Public support percentage from 2016 Schedule A, Part II, line 14 .....  | <b>15</b>                           | 83.74 % |
| <b>16a 33 1/3% support test - 2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....  | <input checked="" type="checkbox"/> |         |
| <b>b 33 1/3% support test - 2016.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....   | <input type="checkbox"/>            |         |
| <b>17a 10% -facts-and-circumstances test - 2017.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....    | <input type="checkbox"/>            |         |
| <b>b 10% -facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... | <input type="checkbox"/>            |         |
| <b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....  | <input type="checkbox"/>            |         |

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

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

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....   |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose ..... |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....   |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....  |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5 .....   |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....  |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b .....  |          |          |          |          |          |           |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6 .....   |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ..... |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....                           |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b .....   |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....      |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....                                  |          |          |          |          |          |           |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)   |          |          |          |          |          |           |

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

**Section C. Computation of Public Support Percentage**

|  |           |   |
|--|-----------|---|
| <b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) ..... | <b>15</b> | % |
| <b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15 .....                      | <b>16</b> | % |

**Section D. Computation of Investment Income Percentage**

|   |           |   |
|---|-----------|---|
| <b>17</b> Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) ..... | <b>17</b> | % |
| <b>18</b> Investment income percentage from 2016 Schedule A, Part III, line 17 .....                        | <b>18</b> | % |

**19a 33 1/3% support tests - 2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>  |     |    |
| <b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>   |     |    |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>   |     |    |
| <b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>   |     |    |
| <b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>  |     |    |
| <b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>  |     |    |
| <b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>  |     |    |
| <b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>   |     |    |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> |     |    |
| <b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   |     |    |
| <b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?  |     |    |
| <b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>   |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>  |     |    |
| <b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
| <b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>   |     |    |
| <b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>   |     |    |

**Part IV Supporting Organizations** (continued)

|  | Yes | No |
|--|-----|----|
| <b>11</b> Has the organization accepted a gift or contribution from any of the following persons?  |     |    |
| <b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? |     |    |
| <b>b</b> A family member of a person described in (a) above?   |     |    |
| <b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .                                       |     |    |

**Section B. Type I Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. |     |    |
| <b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.   |     |    |

**Section C. Type II Supporting Organizations**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). |     |    |

**Section D. All Type III Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> 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? |     |    |
| <b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).   |     |    |
| <b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.  |     |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|   |     |    |
|---|-----|----|
| <b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  |     |    |
| <b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.   |     |    |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.  |     |    |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).  |     |    |
| <b>2</b> Activities Test. Answer (a) and (b) below.   |     |    |
| <b>a</b> 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 <b>Part VI</b> 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. | Yes | No |
| <b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  |     |    |
| <b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.   |     |    |
| <b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .   |     |    |
| <b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.   |     |    |

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

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| <b>Section A - Adjusted Net Income</b> |  | (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                                      | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)  | 8              |                             |

| <b>Section B - Minimum Asset Amount</b> |   | (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                                       | <b>Total</b> (add lines 1a, 1b, and 1c)   | 1d             |                             |
| e                                       | <b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):                                   |                |                             |
| 2                                       | Acquisition indebtedness applicable to non-exempt-use assets  | 2              |                             |
| 3                                       | Subtract line 2 from line 1d  | 3              |                             |
| 4                                       | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)                                  | 4              |                             |
| 5                                       | Net value of non-exempt-use assets (subtract line 4 from line 3)  | 5              |                             |
| 6                                       | Multiply line 5 by .035   | 6              |                             |
| 7                                       | Recoveries of prior-year distributions  | 7              |                             |
| 8                                       | <b>Minimum Asset Amount</b> (add line 7 to line 6)  | 8              |                             |

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

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

| <b>Section D - Distributions</b>  | <b>Current Year</b> |
|---|---------------------|
| <b>1</b> Amounts paid to supported organizations to accomplish exempt purposes  |                     |
| <b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity              |                     |
| <b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations  |                     |
| <b>4</b> Amounts paid to acquire exempt-use assets  |                     |
| <b>5</b> Qualified set-aside amounts (prior IRS approval required)  |                     |
| <b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.   |                     |
| <b>7 Total annual distributions.</b> Add lines 1 through 6.   |                     |
| <b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions. |                     |
| <b>9</b> Distributable amount for 2017 from Section C, line 6   |                     |
| <b>10</b> Line 8 amount divided by line 9 amount  |                     |

| <b>Section E - Distribution Allocations (see instructions)</b>   | <b>(i)<br/>Excess Distributions</b> | <b>(ii)<br/>Underdistributions<br/>Pre-2017</b> | <b>(iii)<br/>Distributable<br/>Amount for 2017</b> |
|--|-------------------------------------|---|--|
| <b>1</b> Distributable amount for 2017 from Section C, line 6  |                                     |   |  |
| <b>2</b> Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.  |                                     |   |  |
| <b>3</b> Excess distributions carryover, if any, to 2017   |                                     |   |  |
| <b>a</b>   |                                     |   |  |
| <b>b</b> From 2013   |                                     |   |  |
| <b>c</b> From 2014   |                                     |   |  |
| <b>d</b> From 2015   |                                     |   |  |
| <b>e</b> From 2016   |                                     |   |  |
| <b>f Total</b> of lines 3a through e   |                                     |   |  |
| <b>g</b> Applied to underdistributions of prior years  |                                     |   |  |
| <b>h</b> Applied to 2017 distributable amount  |                                     |   |  |
| <b>i</b> Carryover from 2012 not applied (see instructions)  |                                     |   |  |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.   |                                     |   |  |
| <b>4</b> Distributions for 2017 from Section D, line 7: \$   |                                     |   |  |
| <b>a</b> Applied to underdistributions of prior years  |                                     |   |  |
| <b>b</b> Applied to 2017 distributable amount  |                                     |   |  |
| <b>c</b> Remainder. Subtract lines 4a and 4b from 4.   |                                     |   |  |
| <b>5</b> Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions. |                                     |   |  |
| <b>6</b> Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.                        |                                     |   |  |
| <b>7 Excess distributions carryover to 2018.</b> Add lines 3j and 4c.  |                                     |   |  |
| <b>8</b> Breakdown of line 7:  |                                     |   |  |
| <b>a</b> Excess from 2013  |                                     |   |  |
| <b>b</b> Excess from 2014  |                                     |   |  |
| <b>c</b> Excess from 2015  |                                     |   |  |
| <b>d</b> Excess from 2016  |                                     |   |  |
| <b>e</b> Excess from 2017  |                                     |   |  |

Schedule A (Form 990 or 990-EZ) 2017

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

Multiple horizontal lines for supplemental information.

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2017**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

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

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

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

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

|  |   |
|--|---|
| Name of organization<br><b>NEW YORK SHAKESPEARE FESTIVAL</b> | Employer identification number<br><b>13-1844852</b> |
|--|---|

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

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

- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

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

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2017

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

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

| <b>Limits on Lobbying Expenditures</b><br>(The term "expenditures" means amounts paid or incurred.)  | (a) Filing organization's totals                   | (b) Affiliated group totals        |                    |                               |   |  |   |  |  |   |                   |              |  |  |
|--|--|------------------------------------|--------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|
| <b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>d</b> Other exempt purpose expenditures .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.  |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> | If the amount on line 1e, column (a) or (b) is:    | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. |  |  |
| If the amount on line 1e, column (a) or (b) is:  | The lobbying nontaxable amount is:                 |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Not over \$500,000   | 20% of the amount on line 1e.                      |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$500,000 but not over \$1,000,000  | \$100,000 plus 15% of the excess over \$500,000.   |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$1,000,000 but not over \$1,500,000  | \$175,000 plus 10% of the excess over \$1,000,000. |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$1,500,000 but not over \$17,000,000   | \$225,000 plus 5% of the excess over \$1,500,000.  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| Over \$17,000,000  | \$1,000,000.                                       |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....   |  |                                    |                    |                               |   |  |   |  |  |   |                   |              |  |  |
| <b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....   | <input type="checkbox"/> Yes                       | <input type="checkbox"/> 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.)

| <b>Lobbying Expenditures During 4-Year Averaging Period</b>         |          |          |          |          |           |
|---|----------|----------|----------|----------|-----------|
| Calendar year<br>(or fiscal year beginning in)                      | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) Total |
| <b>2a</b> Lobbying nontaxable amount                                |          |          |          |          |           |
| <b>b</b> Lobbying ceiling amount<br>(150% of line 2a, column(e))    |          |          |          |          |           |
| <b>c</b> Total lobbying expenditures                                |          |          |          |          |           |
| <b>d</b> Grassroots nontaxable amount                               |          |          |          |          |           |
| <b>e</b> Grassroots ceiling amount<br>(150% of line 2d, column (e)) |          |          |          |          |           |
| <b>f</b> Grassroots lobbying expenditures                           |          |          |          |          |           |

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

| For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.   | (a) |    | (b)     |
|--|-----|----|---------|
|  | Yes | No | Amount  |
| <b>1</b> 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: |     |    |         |
| <b>a</b> Volunteers?   |     | X  |         |
| <b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  | X   |    |         |
| <b>c</b> Media advertisements?   |     | X  |         |
| <b>d</b> Mailings to members, legislators, or the public?  |     | X  |         |
| <b>e</b> Publications, or published or broadcast statements?   |     | X  |         |
| <b>f</b> Grants to other organizations for lobbying purposes?  |     | X  |         |
| <b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?   | X   |    |         |
| <b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?   |     | X  |         |
| <b>i</b> Other activities?   | X   |    | 45,000. |
| <b>j</b> Total. Add lines 1c through 1i  |     |    | 45,000. |
| <b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  |     | X  |         |
| <b>b</b> If "Yes," enter the amount of any tax incurred under section 4912   |     |    |         |
| <b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912  |     |    |         |
| <b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  |     |    |         |

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

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

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

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

**Part IV Supplemental Information**

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

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

THE ADMINISTRATIVE CHIEF OF STAFF PARTICIPATES IN REQUESTING PUBLIC SUPPORT FROM NEW YORK CITY SOURCES TO HELP FUND MISSION CRITICAL CAPITAL PROJECTS BEING UNDERTAKEN BY THE NEW YORK SHAKESPEARE FESTIVAL.

DURING FY18, WE ENGAGED A VENDOR FOR LOBBYING ON BEHALF TO SEEK VARIOUS

**Part IV** Supplemental Information *(continued)*

APPROVALS FOR OUR CAPITAL CAMPAIGN.

Lined area for supplemental information.

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

**Name of the organization** NEW YORK SHAKESPEARE FESTIVAL **Employer identification number** 13-1844852

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

|   | (a) Donor advised funds                                  | (b) Funds and other accounts |
|---|--|------------------------------|
| 1 Total number at end of year .....   |  |                              |
| 2 Aggregate value of contributions to (during year) .....   |  |                              |
| 3 Aggregate value of grants from (during year) .....  |  |                              |
| 4 Aggregate value at end of year .....  |  |                              |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....  | <input type="checkbox"/> Yes <input type="checkbox"/> No |                              |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ..... | <input type="checkbox"/> Yes <input type="checkbox"/> No |                              |

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

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

Preservation of land for public use (e.g., recreation or education)       Preservation of a historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

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

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

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

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

Yes  No

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

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

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

Yes  No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X .....

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

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

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

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Schedule D (Form 990) 2017

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

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

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

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

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

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

|  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     | 19,870,203.      | 18,574,944.    | 18,676,036.        | 20,007,038.          | 18,509,281.         |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     | 1,451,017.       | 2,180,259.     | 783,908.           | -446,002.            | 2,346,098.          |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs | -885,000.        | -885,000.      | -885,000.          | -885,000.            | -848,341.           |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            | 20,436,220.      | 19,870,203.    | 18,574,944.        | 18,676,036.          | 20,007,038.         |

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

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  75.46 %
- c Temporarily restricted endowment  24.54 %

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

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

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

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

**Part VI Land, Buildings, and Equipment.**

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

| Description of property  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land  |                                      |                                 |                              |                |
| b Buildings  |                                      |                                 |                              |                |
| c Leasehold improvements   |                                      | 19,159,675.                     | 5,219,388.                   | 13,940,287.    |
| d Equipment  |                                      | 1,387,668.                      | 1,085,811.                   | 301,857.       |
| e Other  |                                      | 1,914,019.                      | 1,595,208.                   | 318,811.       |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) |                                      |                                 |                              | 14,560,955.    |

**Part VII Investments - Other Securities.**

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

| (a) Description of security or category (including name of security)      | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives .....   |                |   |
| (2) Closely-held equity interests .....                                   |                |   |
| (3) Other   |                |   |
| (A) CANYON VALUE REALIZATION  |                |   |
| (B) FUND LTD.   | 1,339,068.     | END-OF-YEAR MARKET VALUE                                  |
| (C) TACONIC OPPORTUNITY   |                |   |
| (D) OFFSHORE FUND   | 2,428,839.     | END-OF-YEAR MARKET VALUE                                  |
| (E) HCP PRIVATE EQUITY FUND   |                |   |
| (F) III, L.P.   | 223,791.       | END-OF-YEAR MARKET VALUE                                  |
| (G) HCP REAL ASSETS FUND II,  |                |   |
| (H) L.P.  | 211,108.       | END-OF-YEAR MARKET VALUE                                  |
| <b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | 6,653,996.     |   |

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

| 1. (a) Description of liability   | (b) Book value |
|---|----------------|
| (1) Federal income taxes  |                |
| (2) ACCRUED PENSION LIABILITY   | 4,637,630.     |
| (3)   |                |
| (4)   |                |
| (5)   |                |
| (6)   |                |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | 4,637,630.     |

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

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

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

|          |  |           |           |
|----------|--|-----------|-----------|
| <b>1</b> | Total revenue, gains, and other support per audited financial statements                       |           | <b>1</b>  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                            |           |           |
| <b>a</b> | Net unrealized gains (losses) on investments   | <b>2a</b> |           |
| <b>b</b> | Donated services and use of facilities   | <b>2b</b> |           |
| <b>c</b> | Recoveries of prior year grants  | <b>2c</b> |           |
| <b>d</b> | Other (Describe in Part XIII.)   | <b>2d</b> |           |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b>  |           | <b>2e</b> |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>   |           | <b>3</b>  |
| <b>4</b> | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                           |           |           |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b                               | <b>4a</b> |           |
| <b>b</b> | Other (Describe in Part XIII.)   | <b>4b</b> |           |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b>  |           | <b>4c</b> |
| <b>5</b> | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) |           | <b>5</b>  |

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

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

|          |   |           |           |
|----------|---|-----------|-----------|
| <b>1</b> | Total expenses and losses per audited financial statements                                      |           | <b>1</b>  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part IX, line 25:                               |           |           |
| <b>a</b> | Donated services and use of facilities  | <b>2a</b> |           |
| <b>b</b> | Prior year adjustments  | <b>2b</b> |           |
| <b>c</b> | Other losses  | <b>2c</b> |           |
| <b>d</b> | Other (Describe in Part XIII.)  | <b>2d</b> |           |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b>   |           | <b>2e</b> |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>  |           | <b>3</b>  |
| <b>4</b> | Amounts included on Form 990, Part IX, line 25, but not on line 1:                              |           |           |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b                                | <b>4a</b> |           |
| <b>b</b> | Other (Describe in Part XIII.)  | <b>4b</b> |           |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b>   |           | <b>4c</b> |
| <b>5</b> | Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) |           | <b>5</b>  |

**Part XIII Supplemental Information.**

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

**PART V, LINE 4:**

INCOME FROM THE ENDOWMENTS IS USED TO SUPPORT THE ARTISTIC AND OPERATIONAL ACTIVITIES OF THE ORGANIZATION.





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

|                 |  | (a) Event #1  | (b) Event #2                      | (c) Other events       | (d) Total events<br>(add col. (a) through<br>col. (c)) |
|-----------------|--|---|-----------------------------------|------------------------|--|
|                 |  | ANNUAL GALA<br>(event type)                                 | BENEFIT<br>EVENTS<br>(event type) | NONE<br>(total number) |  |
| Revenue         | 1  | Gross receipts  | 2,758,124.                        | 518,157.               | 3,276,281.   |
|                 | 2  | Less: Contributions   | 2,528,726.                        | 518,157.               | 3,046,883.   |
|                 | 3  | Gross income (line 1 minus line 2)                          | 229,398.                          |                        | 229,398.   |
| Direct Expenses | 4  | Cash prizes   |                                   |                        |  |
|                 | 5  | Noncash prizes  |                                   |                        |  |
|                 | 6  | Rent/facility costs   | 49,391.                           |                        | 49,391.  |
|                 | 7  | Food and beverages  | 180,007.                          |                        | 180,007.   |
|                 | 8  | Entertainment   |                                   |                        |  |
|                 | 9  | Other direct expenses                                       |                                   |                        |  |
|                 | 10   | Direct expense summary. Add lines 4 through 9 in column (d) |                                   |                        | 229,398.   |
| 11              | Net income summary. Subtract line 10 from line 3, column (d) |   |                                   | 0.                     |  |

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

|                 |  | (a) Bingo   | (b) Pull tabs/instant<br>bingo/progressive bingo                    | (c) Other gaming  | (d) Total gaming (add<br>col. (a) through col. (c)) |
|-----------------|--|---|---|---|---|
|                 |  |   |   |   |   |
| Revenue         | 1  | Gross revenue   |   |   |   |
|                 | 2  | Cash prizes   |   |   |   |
| Direct Expenses | 3  | Noncash prizes  |   |   |   |
|                 | 4  | Rent/facility costs   |   |   |   |
|                 | 5  | Other direct expenses   |   |   |   |
| 6               | Volunteer labor  | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No |   |
| 7               | Direct expense summary. Add lines 2 through 5 in column (d)        |   |   |   |   |
| 8               | Net gaming income summary. Subtract line 7 from line 1, column (d) |   |   |   |   |

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

|                               |            |   |
|-------------------------------|------------|---|
| a The organization's facility | <b>13a</b> | % |
| b An outside facility         | <b>13b</b> | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

\_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: GURA ASSOCIATES LTD

(I) ADDRESS OF FUNDRAISER: 505 WEST END AVENUE, NEW YORK, NY 10024

(I) NAME OF FUNDRAISER: COMMUNITY COUNSELLING SERVICE CO, LLC

(I) ADDRESS OF FUNDRAISER: 527 MADISON AVE, 5TH FL, NEW YORK, NY 10022



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Name of the organization **NEW YORK SHAKESPEARE FESTIVAL** Employer identification number **13-1844852**

**Part I General Information on Grants and Assistance**

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

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

| <b>1 (a)</b> Name and address of organization or government                          | <b>(b)</b> EIN | <b>(c)</b> IRC section (if applicable) | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of noncash assistance | <b>(h)</b> Purpose of grant or assistance   |
|--|----------------|--|---------------------------------|--|--|--|---|
| MOSAIC YOUTH THEATRE OF DETROIT<br>2251 ANTIETAM AVE<br>DETROIT, MI 48207            | 38-3069610     | 501(C)(3)                              | 42,200.                         | 0.                                       |  |  | TRAVEL AND ACCOMMODATION FOR MOSAIC SUMMER RESIDENCY AT THE PUBLIC THEATER            |
| THE SHAKESPEARE SOCIETY OF AMERICA, INC. - 425 LAFAYETTE STREET - NEW YORK, NY 10003 | 13-3974836     | 501(C)(3)                              | 693,027.                        | 0.                                       |  |  | GENERAL OPERATING SUPPORT FOR THE PERFORMANCE, COMMENTARY, AND EDUCATIONAL ACTIVITIES |
|  |                |  |                                 |  |  |  |   |
|  |                |  |                                 |  |  |  |   |
|  |                |  |                                 |  |  |  |   |
|  |                |  |                                 |  |  |  |   |
|  |                |  |                                 |  |  |  |   |

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

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

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

Schedule I (Form 990) (2017)

**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

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

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
| ANNENBERG FELLOWSHIP            | 1                        | 25,000.                  | 0.                                |   |                                       |
| VAN LIER FELLOWSHIP             | 3                        | 36,350.                  | 0.                                |   |                                       |
| TOW FELLOWSHIP                  | 1                        | 65,000.                  | 0.                                |   |                                       |
|                                 |                          |                          |                                   |   |                                       |
|                                 |                          |                          |                                   |   |                                       |

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

PART I, LINE 2:

GRANTEE IS REQUIRED TO SUBMIT A BUDGET FOR APPROVAL. ONCE APPROVED, NYSF MAINTAINS THE BUDGET AND MONITORS GRANT EXPENSES AGAINST IT. PAYMENT TO THE GRANTEE IS USUALLY IN THE FORM OF REIMBURSEMENT. GRANTEE IS REQUIRED TO SUBMIT RECEIPTS AND SUPPORTING DOCUMENTATION IN ORDER TO BE REIMBURSED. DEPENDING ON THE PROJECT, INTERIM PROGRESS REPORTS MAY BE REQUIRED. A FINAL REPORT AND ACCOUNTING STATEMENT IS REQUIRED AT THE END OF THE PROJECT.

**Part IV** Supplemental Information

A THREE-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 II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

THE SHAKESPEARE SOCIETY OF AMERICA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL OPERATING SUPPORT FOR THE PERFORMANCE, COMMENTARY, AND EDUCATIONAL ACTIVITIES RELATED TO SHAKESPEARE'S WORKS.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2017**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

**NEW YORK SHAKESPEARE FESTIVAL**

Employer identification number

**13-1844852**

**Part I Questions Regarding Compensation**

**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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input type="checkbox"/> Travel for companions                                | <input type="checkbox"/> Payments for business use of personal residence    |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> 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 .....

**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? .....

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**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:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- 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 .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

|           | Yes | No |
|-----------|-----|----|
| <b>1b</b> |     | X  |
| <b>2</b>  | X   |    |
| <b>4a</b> | X   |    |
| <b>4b</b> |     | X  |
| <b>4c</b> |     | X  |
| <b>5a</b> |     | X  |
| <b>5b</b> |     | X  |
| <b>6a</b> |     | X  |
| <b>6b</b> |     | X  |
| <b>7</b>  |     | X  |
| <b>8</b>  |     | X  |
| <b>9</b>  |     |    |

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

Schedule J (Form 990) 2017

**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.

| (A) Name and Title                                   |      | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|--|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
|  |      | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |  |                         |                                 |   |
| (1) PATRICK WILLINGHAM<br>EXECUTIVE DIRECTOR         | (i)  | 390,538.   | 0.                                  | 690.                                | 11,142.  | 13,727.                 | 416,097.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (2) PAUL J EUSTIS<br>ARTISTIC DIRECTOR               | (i)  | 589,918.   | 0.                                  | 1,290.                              | 30,242.  | 37,336.                 | 658,786.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (3) PATRICIA HUIE<br>CHIEF FINANCIAL OFFICER         | (i)  | 181,521.   | 0.                                  | 0.                                  | 0.   | 11,248.                 | 192,769.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (4) RUTH STERNBERG<br>PRODUCTION EXECUTIVE           | (i)  | 192,427.   | 0.                                  | 0.                                  | 20,654.  | 24,985.                 | 238,066.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (5) THOMAS MCCANN<br>SENIOR DIRECTOR OF MARKETING    | (i)  | 169,903.   | 0.                                  | 0.                                  | 7,058.   | 8,156.                  | 185,117.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (6) MANDY HACKETT<br>ASSOCIATE ARTISTIC DIRECTOR     | (i)  | 159,100.   | 0.                                  | 0.                                  | 7,941.   | 27,885.                 | 194,926.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (7) MARIA GOYANES<br>ASSOCIATE PRODUCER              | (i)  | 153,030.   | 0.                                  | 0.                                  | 4,758.   | 12,061.                 | 169,849.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (8) ALEX TONETTA<br>ARTISTIC CONTENT CURATOR         | (i)  | 155,911.   | 0.                                  | 0.                                  | 3,306.   | 12,573.                 | 171,790.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (9) SHANTA THAKE-KRIEGSMANN<br>DIRECTOR OF JOE'S PUB | (i)  | 140,114.   | 0.                                  | 0.                                  | 4,655.   | 30,675.                 | 175,444.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (10) JEAN O'HARE<br>DIRECTOR OF NEW WORK DEVELOPMENT | (i)  | 157,384.   | 0.                                  | 0.                                  | 0.   | 18,344.                 | 175,728.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (11) THERESA MORELLO<br>CHIEF ADVANCEMENT OFFICER    | (i)  | 177,787.   | 0.                                  | 170,252.                            | 0.   | 18,432.                 | 366,471.                        | 0.  |
|  | (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 TO COVER CERTAIN SUPPLEMENTAL RETIREMENT BENEFITS.

PART I, LINE 4A:

THERESA MORELLO WAS PAID A SEVERANCE OF \$39,231 IN FY17 AND \$183,087 IN FY18.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2017**

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ 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](http://www.irs.gov/Form990) for the latest information.

Name of the organization **NEW YORK SHAKESPEARE FESTIVAL** Employer identification number **13-1844852**

| Part I Types of Property   | (a)<br>Check if applicable | (b)<br>Number of contributions or items contributed | (c)<br>Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d)<br>Method of determining noncash contribution amounts |
|--|----------------------------|---|--|---|
| 1 Art - Works of art .....   |                            |   |  |   |
| 2 Art - Historical treasures .....                                 |                            |   |  |   |
| 3 Art - Fractional interests .....                                 |                            |   |  |   |
| 4 Books and publications .....                                     |                            |   |  |   |
| 5 Clothing and household goods .....                               |                            |   |  |   |
| 6 Cars and other vehicles .....                                    |                            |   |  |   |
| 7 Boats and planes .....   |                            |   |  |   |
| 8 Intellectual property .....                                      |                            |   |  |   |
| 9 Securities - Publicly traded .....                               | X                          | 24  | 222,583.   | FAIR MARKET VALUE   |
| 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 organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... **29**

|   | Yes | No |
|---|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? ..... |     | X  |
| b If "Yes," describe the arrangement in Part II.  |     |    |
| 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....   | X   |    |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....  | X   |    |
| b If "Yes," describe in Part II.  |     |    |
| 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.   |     |    |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

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

SCHEDULE M, LINE 32B:

SIGNATURE SECURITIES HOLDS NYSF'S BROKERAGE ACCOUNT TO RECEIVE STOCK GIFTS. STOCK GIFTS ARE SOLD UPON RECEIPT.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

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 2, NEW PROGRAM SERVICES:

PUBLIC SHAKESPEARE INITIATIVE:

UNDER THE LEADERSHIP OF SCHOLAR MICHAEL SEXTON, THE PUBLIC SHAKESPEARE  
INITIATIVE WILL PRODUCE AND PRESENT 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.

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

NEW YORK PREMIERES INCLUDED OFFICE HOUR BY JULIA CHO, LUIS ALFARO'S  
OEDIPUS EL REY, THE LOW ROAD BY BRUCE NORRIS, AND RINNE GROFF'S FIRE IN  
DREAMLAND.

|   |  |
|---|--|
| Name of the organization<br>NEW YORK SHAKESPEARE FESTIVAL | Employer identification number<br>13-1844852 |
|---|--|

THE FOURTEENTH UNDER THE RADAR FESTIVAL, A PLATFORM FOR US-BASED AND INTERNATIONAL DEVISED THEATER GROUPS, PRESENTED THE WORK OF 21 CONTEMPORARY THEATER COMPANIES FEATURING OVER 150 ARTISTS FROM ACROSS THE US AND AROUND THE WORLD. THE 12-DAY FESTIVAL IN JANUARY 2018 ATTRACTED AN AUDIENCE OF 4,000 PEOPLE TO 26 SHOWS AT THE PUBLIC THEATER AND ITS FIVE PARTNER VENUES.

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

THE 2018 SHAKESPEARE IN THE PARK SEASON, ITS 56TH SEASON AT THE DELACORTE, PRESENTED TWO PRODUCTIONS OVER NINE WEEKS, REACHING AN AUDIENCE OVER 100,000. THE FIRST PRODUCTION WAS OTHELLO, DIRECTED BY RUBEN SANTIAGO-HUDSON, FEATURING CHUKWUDI IWUJI, COREY STOLL, AND HEATHER LIND. THE SECOND WAS AN EXPANDED AND REMOUNTED VERSION OF PUBLIC WORKS' ADAPTATION OF TWELFTH NIGHT, CO-DIRECTED BY KWAME KWEI-ARMAH AND OSKAR EUSTIS, WITH ORIGINAL MUSIC AND LYRICS BY SHAINA TAUB, AND FEATURING ATO BLANKSON-WOOD, NIKKI M. JAMES, ANDREW KOBER, AND A ROTATING CAST OF OVER 200 PUBLIC WORKS COMMUNITY PARTICIPANTS.

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

WORLD, HOSTING APPROXIMATELY 800 SHOWS AND SERVING OVER 100,000 AUDIENCE MEMBERS. THE DIVERSE ROSTER OF PROGRAMMING FEATURED TOP PERFORMERS FROM BROADWAY, CABARET, DANCE, WORLD, SINGER-SONGWRITER, JAZZ, COUNTRY AND INDIE GENRES.

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

COMMUNITY PROGRAMS

THE MOBILE UNIT, A CONTEMPORARY VERSION OF THE PUBLIC THEATER'S INITIAL

|   |  |
|---|--|
| Name of the organization<br>NEW YORK SHAKESPEARE FESTIVAL | Employer identification number<br>13-1844852 |
|---|--|

TOURING MODEL, NOT ONLY SEEKS OUT DIVERSE AUDIENCES BUT SERVES AUDIENCES WHOSE ACCESS TO ARTS EXPERIENCES ARE SEVERELY INHIBITED BY THEIR ENVIRONMENTS. 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.

IN THE FALL OF 2017, THE MOBILE UNIT EMBARKED ON A THREE-WEEK, 13-VENUE TOUR OF THE FIVE BOROUGHS, FEATURING FREE PERFORMANCES OF SHAKESPEARE'S THE WINTER'S TALE DIRECTED BY LEE SUNDAY EVANS. IN THE SPRING 2018, A SIMILAR TOUR WAS MOUNTED OF HENRY V, DIRECTED BY ROBERT O'HARA. BOTH TOURS WERE FOLLOWED BY DOWNTOWN RUNS AT THE PUBLIC THEATER THAT OFFERED ENTIRELY FREE TICKETS, WITH 20 TICKETS FOR EACH PERFORMANCE RESERVED FOR COMMUNITY ORGANIZATIONS.

IN 2018, WE WERE THRILLED TO EXPAND OUR ANNUAL MOBILE UNIT ACTIVITIES TO INCLUDE ADDITIONAL TOURS OF COMMISSIONED, NON-SHAKESPEARE AND MUSIC, COMEDIC PERFORMANCE, AND SPANISH-LANGUAGE WORKS TO BE DEPLOYED ON SHORTER, MORE TARGETED TOURS REACHING 3-5 VENUES. ADDITIONALLY, WE ARE EXPLORING NEW PARTNERSHIPS WITH THE NEW YORK CITY LIBRARY SYSTEMS IN MANHATTAN, THE BRONX, QUEENS AND BROOKLYN, THE NEW YORK CITY HOUSING AUTHORITY, AND THE CITY PARKS FOUNDATION WITH THE INTENT OF BROADENING OUR PERFORMANCE VENUES TO INCLUDE PUBLIC HOUSING, LIBRARIES AND PARKS.

PUBLIC WORKS PARTNERS WITH SOCIAL SERVICE ORGANIZATIONS SERVING THOSE

|   |  |
|---|--|
| Name of the organization<br>NEW YORK SHAKESPEARE FESTIVAL | Employer identification number<br>13-1844852 |
|---|--|

WHO STAND TO BENEFIT MOST FROM THE TRANSFORMATIVE POWER OF THEATER.

OVER THE LAST FIVE YEARS, PUBLIC WORKS HAS LED WORKSHOPS WITH ITS PARTNERS, BROUGHT THEM TO THE THEATER MANY TIMES, HELD COMMUNAL POTLUCKS, AND FORMED DEEP AND REAL RELATIONSHIPS WITH THE ORGANIZATIONS AND THEIR CLIENTS.

FOR THE 2017-2018 SEASON, PUBLIC WORKS CONTINUED TO WORK WITH FORTUNE SOCIETY (QUEENS), DREAMYARD (THE BRONX), THE BROWNSVILLE RECREATION CENTER (BROOKLYN) AS CORE COMMUNITY PARTNERS, CENTER FOR FAMILY LIFE AT SUNSET PARK (QUEENS), CASITA MARIA (BRONX), AND THE MILITARY RESILIENCE PROJECT (ALL BOROUGHES). THE CHILDREN'S AID SOCIETY (MANHATTAN) AND DOMESTIC WORKERS UNITED (STATEN ISLAND AND CITYWIDE) SUSTAINED ALUMNI RELATIONSHIPS, ENGAGING IN THE PUBLIC WORKS COMMUNITY WHILE AT THE SAME TIME MAKING ROOM TO INVITE NEW PRIMARY PARTNERS TO THE TABLE. THE SEASON CULMINATED WITH A FIVE-NIGHT RUN OF THE ORIGINAL MUSICAL ADAPTATION OF AS YOU LIKE IT, ADAPTED BY LAURIE WOOLERY AND SHAINA TAUB, DIRECTED BY WOOLERY AND FEATURING MUSIC BY TAUB. THIS PRODUCTION FEATURED OVER 200 COMMUNITY PLAYERS AT THE DELACORTE THEATER.

THE PUBLIC FORUM IS A VITAL NEXUS OF CREATIVITY, COMMUNITY, AND IDEAS, DEDICATED TO EMBRACING THE COMPLEXITIES OF CONTEMPORARY SOCIETY. THE PROGRAM OFFERS A SERIES OF CONVERSATIONS AND PERFORMANCES FEATURING LEADING VOICES IN POLITICS, MEDIA, AND THE ARTS, DRAWING THE BROADEST RANGE OF VOICES IN CONVERSATION ABOUT AMERICAN CULTURE. USING THEATER AS A JUMP-OFF POINT TO SHED LIGHT ON CONTEMPORARY ISSUES, PUBLIC FORUM HAS TACKLED A NUMBER OF ISSUES FROM POVERTY AND INEQUALITY, TO MUSIC AND AMERICAN IDENTITY. BEGINNING IN JANUARY 2018, PUBLIC FORUM LAUNCHES A NEW SERIES, CIVIC SALONS, OFFERING A MONTHLY BRUNCH-TIME GATHERING

Name of the organization

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DEDICATED TO CREATING AN ONGOING CONVERSATION FORGED IN THE SPIRIT OF COMMUNITY AND CONVERSATION. EACH MONTH WILL FEATURE A DIFFERENT THEME AND A PLATFORM FOR READINGS, MUSICAL PERFORMANCE, AND KEYNOTE ADDRESS-ALL CHOSEN IN THE HOPES OF INSPIRING CIVIC ENGAGEMENT AND SOCIAL CHANGE.

UNDER THE LEADERSHIP OF SCHOLAR MICHAEL SEXTON, THE PUBLIC SHAKESPEARE INITIATIVE WILL PRODUCE AND PRESENT 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:

LAUNCHED DURING THE 2013-14 SEASON, PUBLIC STUDIO PROVIDES A LOW-COST PRODUCTION MODEL THAT HELPS PLAYWRIGHTS BREAK FREE OF THE WORKSHOP PROCESS AND PRESENT THEIR WORK IN FRONT OF AUDIENCES. WITH A STRIPPED-DOWN AESTHETIC AND STREAMLINED DEVELOPMENT PROCESS, PLAYWRIGHTS ARE GIVEN A CHANCE TO SHARE THEIR EARLY WORK WITH THE GENERAL PUBLIC. PUBLIC STUDIO PRESENTS TWO PERFORMANCES EACH SEASON, AND PARTICIPANT SELECTION IS LIMITED TO WRITERS WHO HAVE NOT PREVIOUSLY RECEIVED A MAJOR PRODUCTION.

IN 2018, PUBLIC STUDIO PRESENTED A DIVERSE SLATE OF TWO EARLY CAREER WRITERS RECEIVING THEIR FIRST MAJOR THEATRICAL WORKSHOP: AIN'T NO MO,

Name of the organization

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WRITTEN BY JORDAN E. COOPER AND DIRECTED BY STEVIE WALKER WEBB AND  
 MASCULINITY MAX WRITTEN BY EWG ALUMNUS MJ KAUFMAN AND DIRECTED BY  
 DUSTIN WILLS.

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.  
 DIRECTOR OF NEW WORK JEANIE O'HARE AND HER TEAM WORK 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 LED BY THE  
 PUBLIC'S NEW WORK DEPARTMENT, 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

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number

13-1844852

WHO DON'T 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. UNDER THE LEADERSHIP OF THE DIRECTOR OF THE DEVISED THEATER INITIATIVE ANDREW KIRCHER, DTWG OFFERS NEXT-GENERATION THEATER-MAKERS A SUPPORTIVE FRAMEWORK IN WHICH TO 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) & NEW YORK VOICES

IN ORDER TO CREATE SUSTAINABLE RESOURCES FOR THE FIELD AND TO SUPPORT EMERGING ARTISTS, SENIOR DIRECTOR OF ARTISTIC PROGRAMS, SHANTA THAKE, AND DIRECTOR OF JOE'S PUB, ALEX KNOWLTON, BLENDED THE PUBLIC'S APPROACH TO SUPPORTING EMERGING PLAYWRIGHTS AND INDEPENDENT ARTISTS TO CREATE TWO PROGRAMS: JOE'S PUB WORKING GROUP, WHICH AIMS TO ENRICH THE SUSTAINABILITY AND GROWTH OF NEW YORK-BASED EMERGING ARTISTS' CAREERS; AND NEW YORK VOICES, A COMMISSIONING INITIATIVE FOR MUSICIANS AND PERFORMANCE ARTISTS TO CREATE CROSS-GENRE THEATER PIECES. JOE'S PUB WORKING GROUP SUPPORTS COHORTS OF FIVE EARLY CAREER MUSICIANS AND PERFORMANCE ARTISTS BY PROVIDING A VARIETY OF SUPPORT. THESE INCLUDE ADMINISTRATIVE RESOURCES, PHYSICAL SPACE, AND CURATORIAL SERVICES - FURTHER CULTIVATING A COMMUNITY ATMOSPHERE WHEREIN THOSE ARTISTS CAN CREATE AND SUSTAIN NEW AND DEVELOPING WORK. THE PROGRAM SELECTS FROM THE FIELD'S MOST EXCITING ARTISTS-IDENTIFYING MUSICIANS AND PERFORMANCE

|   |  |
|---|--|
| Name of the organization<br>NEW YORK SHAKESPEARE FESTIVAL | Employer identification number<br>13-1844852 |
|---|--|

ARTISTS THAT PARTICULARLY EXHIBIT A STRONG NARRATIVE VOICE IN THEIR WORK-AND ASKS THEM TO EXPLORE THEATRICAL STORYTELLING AND SONGWRITING. EXPENSES \$ 8,516,601. INCLUDING GRANTS OF \$ 861,577. REVENUE \$ 594,437.

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

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. THE HOPE FOR THESE SHOWS IS THAT THEY WILL LEAD TO LONGER RUNS IN VARIOUS MARKETS AROUND THE COUNTRY AND ALLOW THESE MUSICIANS TO ACCESS A NEW REALM OF GRANTS AND FUNDING. NEW YORK VOICES ANNUALLY COMMISSIONS A SMALL GROUP OF ARTISTS OVER THE COURSE OF THE YEAR, PRODUCED AS A CULMINATING PERFORMANCE SERIES. IN ADDITION, THE PROGRAM PROVIDES FINISHING FUNDS AS NECESSARY TO ASSIST THE ARTIST IN FULLY REALIZING EACH PROJECT AND INCREASE THEIR VIABILITY FOR A TOURING LIFE. WITH THESE DYNAMIC INITIATIVES, JOE'S PUB HAS BEEN ABLE TO GROW FROM BEING STRICTLY A PRESENTING VENUE INTO A ROBUST PRODUCING EFFORTS, WORKING WITH A DIVERSE SLATE OF MULTIDISCIPLINARY ARTISTS.

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

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

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number

13-1844852

## SPECIFIC MATTERS PURSUANT TO THE ORGANIZATION'S BY-LAWS.

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

MANAGEMENT (INCLUDING BUT NOT LIMITED TO THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER) REVIEWS THE FORM 990 WITH THE TREASURER AND 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:

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.

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

THE ARTISTIC DIRECTOR'S CONTRACT WAS LAST RENEWED IN JUNE 2015 AND A COMPENSATION STUDY WAS PERFORMED IN 2017. THE EXECUTIVE DIRECTOR'S CONTRACT WAS RENEWED IN JULY 2015 AND A COMPENSATION STUDY WAS PERFORMED IN 2017. 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.

FOR THE CHIEF ADVANCEMENT OFFICER (LAST PERFORMED 2017), AN INDEPENDENT

|   |  |
|---|--|
| Name of the organization<br>NEW YORK SHAKESPEARE FESTIVAL | Employer identification number<br>13-1844852 |
|---|--|

CONSULTANT GARNERED INFORMATION USING COMPARATIVE DATA FROM SIMILARLY-SIZED, NONPROFIT ARTS INSTITUTIONS. THE INFORMATION WAS CULLED FROM FORM 990S AND FROM INDUSTRY SURVEYS. THE REPORT WAS PRESENTED TO THE EXECUTIVE COMMITTEE.

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 -2,685,552.

FORM 990, PART VI, LINE 16A-JOINT VENTURE  
THE ORGANIZATION'S WHOLLY-OWNED SUBSIDIARY, PUBLIC THEATER PRODUCTIONS, INC., PARTICIPATED IN CO-PRODUCTIONS AS A MANAGING MEMBER OF AN ENTITY TAXABLE AS A PARTNERSHIP (SEE SCHEDULE R, PART III) FORMED TO UNDERTAKE A COMMERCIAL THEATRICAL PRODUCTION OF A SHOW ORIGINALLY PRODUCED BY THE NEW YORK SHAKESPEARE FESTIVAL.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization **NEW YORK SHAKESPEARE FESTIVAL** Employer identification number **13-1844852**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable)<br>of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling<br>entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |

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

| (a)<br>Name, address, and EIN<br>of related organization  | (b)<br>Primary activity  | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Exempt Code<br>section | (e)<br>Public charity<br>status (if section<br>501(c)(3)) | (f)<br>Direct controlling<br>entity | (g)<br>Section 512(b)(13)<br>controlled<br>entity? |    |
|---|--|---|-------------------------------|---|-------------------------------------|--|----|
|   |  |   |                               |   |                                     | Yes  | No |
| THE SHAKESPEARE SOCIETY OF AMERICA, INC. -<br>13-3974836, 425 LAFAYETTE STREET, NEW YORK,<br>NY 10003 | INCREASING ENJOYMENT,<br>UNDERSTANDING, AND<br>APPRECIATION OF | NEW YORK  | 501(C)(3)                     | 509(A)(2)   | YES                                 | X  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |
|   |  |   |                               |   |                                     |  |    |

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2017

SEE PART VII FOR CONTINUATIONS

**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.

| (a)<br>Name, address, and EIN<br>of related organization                                    | (b)<br>Primary activity  | (c)<br>Legal domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Predominant income<br>(related, unrelated,<br>excluded from tax under<br>sections 512-514) | (f)<br>Share of total<br>income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Disproportionate<br>allocations? |    | (i)<br>Code V-UBI<br>amount in box<br>20 of Schedule<br>K-1 (Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>ownership |
|---|--------------------------|---|-------------------------------------|---|---------------------------------|--|---|----|---|---|----|--------------------------------|
|   |                          |   |                                     |   |                                 |  | Yes                                     | No |   | Yes                                       | No |                                |
| AQUARIUS BROADWAY LLC -<br>26-4049932, 234 WEST 44TH<br>STREET, #800, NEW YORK, NY<br>10036 | THEATRICAL<br>PRODUCTION | NY  | PUBLIC THEATER<br>PRODUCTIONS       | UNRELATED   | 1,529.                          | 11,364.                                  |   | X  | N/A   | X   |    | 15.86%                         |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |
|   |                          |   |                                     |   |                                 |  |   |    |   |   |    |                                |

**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)<br>Name, address, and EIN<br>of related organization                              | (b)<br>Primary activity              | (c)<br>Legal domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Type of entity<br>(C corp, S corp,<br>or trust) | (f)<br>Share of total<br>income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Percentage<br>ownership | (i)<br>Section<br>512(b)(13)<br>controlled<br>entity? |    |
|---|--------------------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|---|----|
|   |                                      |   |                                     |  |                                 |  |                                | Yes   | No |
| PUBLIC THEATER PRODUCTIONS - 26-3803813<br>425 LAFAYETTE STREET<br>NEW YORK, NY 10003 | COMMERCIAL THEATER<br>CO-PRODUCTIONS | NY  | N/A                                 | C CORP   | 26,709.                         | 68,520.                                  | 100%                           | X   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |
|   |                                      |   |                                     |  |                                 |  |                                |   |    |

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

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

|  | Yes | No |
|--|-----|----|
| <b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |     |    |
| <b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....   | X   |    |
| <b>b</b> Gift, grant, or capital contribution to related organization(s) .....   | X   |    |
| <b>c</b> Gift, grant, or capital contribution from related organization(s) .....   |     | X  |
| <b>d</b> Loans or loan guarantees to or for related organization(s) .....  | X   |    |
| <b>e</b> Loans or loan guarantees by related organization(s) .....   |     | X  |
| <b>f</b> Dividends from related organization(s) .....  |     | X  |
| <b>g</b> Sale of assets to related organization(s) .....   |     | X  |
| <b>h</b> Purchase of assets from related organization(s) .....   |     | X  |
| <b>i</b> Exchange of assets with related organization(s) .....   |     | X  |
| <b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....  |     | X  |
| <b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....  |     | X  |
| <b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....  | X   |    |
| <b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....   |     | X  |
| <b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....   | X   |    |
| <b>o</b> Sharing of paid employees with related organization(s) .....  | X   |    |
| <b>p</b> Reimbursement paid to related organization(s) for expenses .....  |     | X  |
| <b>q</b> Reimbursement paid by related organization(s) for expenses .....  | X   |    |
| <b>r</b> Other transfer of cash or property to related organization(s) .....   | X   |    |
| <b>s</b> Other transfer of cash or property from related organization(s) .....   |     | X  |

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

| (a)<br>Name of related organization                   | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|---|-------------------------------|------------------------|--|
| (1) PUBLIC THEATER PRODUCTIONS, INC. - SEE SCHEDULE O | A                             | 11,806.                | ACCRUED INTEREST                             |
| (2) THE SHAKESPEARE SOCIETY OF AMERICA, INC.          | B                             | 693,027.               | AMOUNT OF GRANT TO THE SOCIETY               |
| (3) THE SHAKESPEARE SOCIETY OF AMERICA, INC.          | Q                             | 736,462.               | REIMBURSEMENT FROM THE SOCIETY               |
| (4)   |                               |                        |  |
| (5)   |                               |                        |  |
| (6)   |                               |                        |  |



**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

**PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:**

NAME OF RELATED ORGANIZATION:

THE SHAKESPEARE SOCIETY OF AMERICA, INC.

PRIMARY ACTIVITY: INCREASING ENJOYMENT, UNDERSTANDING, AND APPRECIATION OF SHAKESPEARE'S WORKS

2017 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

| Asset No. | Description                               | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|---|---------------|--------|------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
|           | MACHINERY & EQUIPMENT                     |               |        |      |      |          |                          |            |                     |                      |                        |                                    |                         |                        |                                 |
| 1         | FURNITURE AND EQUIPMENT                   | VARIOUS       | SL     | 5.00 |      | 16       | 1,387,668.               |            |                     |                      | 1,387,668.             | 1,050,132.                         |                         | 35,679.                | 1,085,811.                      |
|           | * 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT |               |        |      |      |          | 1,387,668.               |            |                     |                      | 1,387,668.             | 1,050,132.                         |                         | 35,679.                | 1,085,811.                      |
|           | OTHER                                     |               |        |      |      |          |                          |            |                     |                      |                        |                                    |                         |                        |                                 |
| 2         | COMPUTER SOFTWARE AND HARDWARE            | VARIOUS       | SL     | 5.00 |      | 16       | 1,395,298.               |            |                     |                      | 1,395,298.             | 1,167,733.                         |                         | 94,012.                | 1,261,745.                      |
| 3         | LEASEHOLD IMPROVEMENTS                    | VARIOUS       | SL     | 5.00 |      | 16       | 19159675.                |            |                     |                      | 19159675.              | 4,352,273.                         |                         | 867,115.               | 5,219,388.                      |
| 5         | WEBSITE                                   | VARIOUS       | SL     | 3.00 |      | 16       | 518,721.                 |            |                     |                      | 518,721.               | 259,360.                           |                         | 74,103.                | 333,463.                        |
|           | * 990 PAGE 10 TOTAL OTHER                 |               |        |      |      |          | 21073694.                |            |                     |                      | 21073694.              | 5,779,366.                         |                         | 1,035,230.             | 6,814,596.                      |
|           | * GRAND TOTAL 990 PAGE 10 DEPR            |               |        |      |      |          | 22461362.                |            |                     |                      | 22461362.              | 5,829,498.                         |                         | 1,070,909.             | 7,900,407.                      |