

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

Do not enter Social Security numbers on this form as it may be made public.

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

OMB No 1545-0047

2013Open to Public
Inspection**A** For the 2013 calendar year, or tax year beginning **OCT 1, 2013** and ending **SEP 30, 2014****B** Check if applicable

- ☒ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**MUNICIPAL ART SOCIETY OF NEW YORK**

Doing Business As

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

488 MADISON AVENUE

Room/suite

1900

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

NEW YORK, NY 10022**F** Name and address of principal officer **VIN CIPPOLA****SAME AS C ABOVE****D** Employer identification number**13-5562288****E** Telephone number**212-935-3960****G** Gross receipts \$ **6,885,738.****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)**H(c)** Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.MAS.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1893** **M** State of legal domicile: **NY****Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1 Briefly describe the organization's mission or most significant activities. DEDICATED TO IMPROVING NEW YORK CITY'S BUILT ENVIRONMENT							
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		34			
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		33			
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5		42			
6	Total number of volunteers (estimate if necessary)	6		45			
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		0.			
7b	Net unrelated business taxable income from Form 990-E, line 34	7b		0.			
8	Contributions and grants (Part VIII, line 1h)	Prior Year	5,181,318.	Current Year	3,450,578.		
9	Program service revenue (Part VIII, line 2g)		362,461.		398,987.		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		393,967.		279,253.		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a)		16,543.		112,648.		
12	Total revenue - add lines 8 through 11 (must equal Part VII, column (A), line 12)		5,954,289.		4,241,466.		
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		455,777.		664,249.		
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)		2,366,707.		2,474,291.		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.		0.		
b	Total fundraising expenses (Part IX, column (D), line 25)						
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,756,504.		2,558,853.		
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,578,988.		5,697,393.		
19	Revenue less expenses. Subtract line 18 from line 12		375,301.		<1,455,927.>		
20	Total assets (Part X, line 16)	Beginning of Current Year	16,765,744.	End of Year	17,469,995.		
21	Total liabilities (Part X, line 26)		1,417,765.		1,168,079.		
22	Net assets or fund balances. Subtract line 21 from line 20		15,347,979.		16,301,916.		

Part II Signature Block

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

Sign Here	Signature of officer	<i>Vin Cipolla</i>	Date	8/14/2015
	Type or print name and title	Vin Cipolla	PRESIDENT	
Paid Preparer Use Only	Print/Type preparer's name	LAUREN CRESCI	Preparer's signature	<i>Lauren Cresci</i>
	Firm's name	LUTZ AND CARR, CPAS LLP	Date	8/11/15
	Firm's address	300 EAST 42ND STREET NEW YORK, NY 10017	Check if self-employed <input type="checkbox"/>	PTIN P01268493
			Firm's EIN	13-1655065
			Phone no.	212-697-2299

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

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

THE MUNICIPAL ART SOCIETY ("MAS") IS THE LEADING ORGANIZATION DEDICATED TO IMPROVING NEW YORK CITY'S BUILT ENVIRONMENT. FOUNDED IN 1893, MAS IS COMMITTED TO MAKING NEW YORK A MORE LIVABLE CITY THROUGH EDUCATION, DIALOGUE AND ADVOCACY FOR INTELLIGENT URBAN PLANNING,

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code) (Expenses \$ 1,383,320. including grants of \$ 462,083.) (Revenue \$ 61,313.)
RESILIENCE PROGRAM:

IN THE WAKE OF THE DEVASTATION WROUGHT BY SUPERSTORM SANDY, MAS HAS INCREASED ITS FOCUS ON BUILDING REGIONAL RESILIENCE AND COMMUNITY CAPACITY. FOLLOWING THE DISASTER, MAS IMPLEMENTED A SERIES OF MONTHLY RESILIENCE ROUNDTABLES BRINGING TOGETHER DIVERSE CONSTITUENCIES TO DEVELOP SOLUTIONS TO PRESCIENT RESILIENCE CHALLENGES. AS A LEAD PARTNER IN REBUILD BY DESIGN, MAS HELPED SECURE \$930 MILLION FOR NEW YORK RESILIENCY EFFORTS IN 2014 FROM THE U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT. MAS HAS ALSO EXPANDED ITS LONG-STANDING LIVABLE NEIGHBORHOODS PROGRAM - AN INITIATIVE THAT PROVIDES CITY RESIDENTS WITH TECHNICAL ASSISTANCE, TRAINING, AND TOOLS TO ENGAGE IN LOCAL PLANNING EFFORTS-TO INCORPORATE POST-SANDY RESILIENCE STRATEGIES & PRACTICES.

4b (Code) (Expenses \$ 1,001,185. including grants of \$ 500.) (Revenue \$ 88,195.)
COMMUNITY ENGAGEMENT:

MAS HELD THE 5TH ANNUAL MAS SUMMIT FOR NEW YORK CITY, GATHERING MORE THAN 125 SPEAKERS FROM THROUGHOUT THE WORLD OVER 2 DAYS TO EXPLORE THE BEST IDEAS IN URBANISM. THE 2014 SUMMIT FOCUSED ON THE THEMES OF EQUITY, PLACE, AND OPPORTUNITY, ADDRESSING THE NEED TO CREATE AN URBAN ENVIRONMENT THAT SUPPORTS ECONOMIC GROWTH AND OPPORTUNITY WHILE ALSO FOSTERING A SENSE OF PLACE AND COMMUNITY. THE HIGH-PROFILE, SIGNATURE EVENT WAS COVERED IN NUMEROUS MEDIA OUTLETS AND DREW MORE THAN 1,000 LIVE ATTENDEES, PLUS HUNDREDS MORE THROUGH LIVE STREAMING. OUR SOCIAL MEDIA REACH WAS GREATER THAN EVER BEFORE, WITH 1,500 TWEETS SENT OUT THAT WERE SEEN 4 MILLION TIMES ACROSS 788,000 TWITTER ACCOUNTS. THE DISCUSSIONS THAT EMERGED AT THE SUMMIT HELPED INFORM MAS PROGRAM

4c (Code) (Expenses \$ 792,304. including grants of \$ 77,157.) (Revenue \$ 47,922.)
ADVOCACY AND PRESERVATION:

PROMOTING INTELLIGENT URBAN DESIGN ON INITIATIVES RELATING TO ZONING, LANDMARK DESIGNATION, AND LAND USE IS CENTRAL TO MAS'S CORE MISSION. MAS ALSO CONTINUED ITS 120-YEAR HISTORY OF IDENTIFYING AND ADVOCATING FOR THE PROTECTION OF CIVIC ARCHITECTURAL ASSETS AS AN ESSENTIAL PART OF MAINTAINING THE CITY'S DIVERSITY AND PROMOTING THOUGHTFUL, SUSTAINABLE GROWTH BY CONDUCTING EXTENSIVE REVIEWS OF HISTORIC MIDTOWN BUILDINGS UNDER THREAT OF DEMOLITION AND SUBMIT TESTIMONY TO THE LANDMARKS PRESERVATION COMMISSION FOR THEIR PROTECTION.

4d Other program services (Describe in Schedule O.)(Expenses \$ 780,750. including grants of \$ 124,509.) (Revenue \$ 201,557.)**4e** Total program service expenses 3,957,559.

Part IV Checklist of Required Schedules

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

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Part IV Checklist of Required Schedules (continued)

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

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 1a 30		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 42		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O. 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year. 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966? 9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? 9b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12. 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders. 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b		
c	Enter the amount of reserves on hand. 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b		

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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

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	34	
b Enter the number of voting members included in line 1a, above, who are independent	33	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	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?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	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?	7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	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	9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NY**

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ROBERT LIBBEY - 212-935-3960**
488 MADISON AVENUE #1900, NEW YORK, NY 10022

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) EUGENIE BIRCH CHAIR	1.00	X		X				0.	0.	0.
(2) VIN CIPOLLA PRESIDENT	40.00	X		X				190,215.	0.	30,627.
(3) FREDERICK ISEMAN VICE CHAIR	1.00	X		X				0.	0.	0.
(4) JAMES M. CLARK, JR. TREASURER	1.00	X		X				0.	0.	0.
(5) FRANCES A. RESHESKE SECRETARY	1.00	X		X				0.	0.	0.
(6) EARL D. WEINER GENERAL COUNSEL	1.00	X		X				0.	0.	0.
(7) ENID BEAL DIRECTOR	1.00	X						0.	0.	0.
(8) PAUL R. BEIRNE DIRECTOR	1.00	X						0.	0.	0.
(9) ELIZABETH BELFER DIRECTOR	1.00	X						0.	0.	0.
(10) SERENA BOARDMAN DIRECTOR	1.00	X						0.	0.	0.
(11) GABRIEL CALATRAVA DIRECTOR	1.00	X						0.	0.	0.
(12) LISA SMITH CASHIN DIRECTOR	1.00	X						0.	0.	0.
(13) VISHAAN CHAKRABARTI DIRECTOR	1.00	X						0.	0.	0.
(14) KATHRYN C. CHENAULT DIRECTOR	1.00	X						0.	0.	0.
(15) CAROL COLETTA DIRECTOR	1.00	X						0.	0.	0.
(16) MICHAEL P. DONOVAN DIRECTOR	1.00	X						0.	0.	0.
(17) KITTY HAWKS DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DANIEL HERNANDEZ DIRECTOR	1.00	X						0.	0.	0.
(19) MANUELA V. HOELTERHOFF DIRECTOR	1.00	X						0.	0.	0.
(20) MICHAEL HOFFMAN DIRECTOR	1.00	X						0.	0.	0.
(21) SOPHIA KOVEN DIRECTOR	1.00	X						0.	0.	0.
(22) DAVID W. LEVINSON DIRECTOR	1.00	X						0.	0.	0.
(23) CHRISTY MACLEAR DIRECTOR	1.00	X						0.	0.	0.
(24) GREGORY MOREY DIRECTOR	1.00	X						0.	0.	0.
(25) JULIO PETERSON DIRECTOR	1.00	X						0.	0.	0.
(26) CARLOS PUJOL DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								190,215.	0.	30,627.
c Total from continuation sheets to Part VII, Section A								663,563.	0.	53,882.
d Total (add lines 1b and 1c)								853,778.	0.	84,509.

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 **6**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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 **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DAVID F. SOLOMON <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(28) KENT M. SWIG <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(29) YEOHLEE TENG <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(30) ALISON TOCCI <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(31) THOMAS VECCHIONE <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(32) THOMAS L. WOLTZ <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(33) WILLIAM H. WRIGHT II <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(34) GARY J. ZARR <u>DIRECTOR</u>	1.00	X						0.	0.	0.
(35) MARGARET NEWMAN <u>EXECUTIVE DIRECTOR(BEGAN IN 2014)</u>	40.00			X				0.	0.	0.
(36) ROBERT LIBBEY <u>VP- FINANCE AND ADMIN</u>	40.00			X				138,476.	0.	21,259.
(37) MARY ROWE <u>VP- RESILIENCE</u>	40.00				X			163,647.	0.	9,847.
(38) ANNE COATES <u>VICE PRESIDENT</u>	40.00				X			113,915.	0.	11,849.
(39) ANDRE ALLAIRE <u>VP- DEVELOPMENT</u>	40.00				X			130,339.	0.	8,114.
(40) RONDA WIST <u>VICE PRESIDENT</u>	40.00				X			117,186.	0.	2,813.
Total to Part VII, Section A, line 1c								663,563.		53,882.

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	913,319.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	72,750.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,464,509.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			3,450,578.			
Program Service Revenue	Business Code						
	2 a MEMBERSHIP DUES	900099		174,235.	174,235.		
	b TOURS AND COURSES	900099		168,127.	168,127.		
	c REGISTRATION	900099		56,625.	56,625.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			398,987.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			253,458.			253,458.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			1,774.			1,774.
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses			2,405,879.	122,859.		
	c Gain or (loss)			148,654.	<122,859.>		
	d Net gain or (loss)			25,795.			25,795.
	8 a Gross income from fundraising events (not including \$ 913,319. of contributions reported on line 1c) See Part IV, line 18	a		115,534.			
	b Less: direct expenses	b		115,534.			
	c Net income or (loss) from fundraising events			0.			
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a MISCELLANEOUS	900099		110,874.			110,874.	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			110,874.				
12 Total revenue. See instructions.			4,241,466.	398,987.	0.	391,901.	

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

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	590,749.	590,749.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	28,500.	28,500.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	45,000.	45,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	371,528.	208,056.	96,597.	66,875.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,809,488.	1,013,313.	470,467.	325,708.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	21,919.	12,275.	5,699.	3,945.
9 Other employee benefits	80,201.	44,913.	20,852.	14,436.
10 Payroll taxes	191,155.	107,047.	49,700.	34,408.
11 Fees for services (non-employees):				
a Management				
b Legal	1,870.	1,870.		
c Accounting	40,158.		40,158.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	82,543.		82,543.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	657,590.	566,074.	91,516.	
12 Advertising and promotion	178,998.	178,998.		
13 Office expenses	267,019.	137,845.	78,550.	50,624.
14 Information technology				
15 Royalties				
16 Occupancy	52,424.	29,358.	13,630.	9,436.
17 Travel	75,561.	42,314.	19,646.	13,601.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	601,309.	565,473.	15,048.	20,788.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	65,068.	36,438.	16,918.	11,712.
23 Insurance	21,889.	12,258.	5,691.	3,940.
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 RESTORATION	142,423.	142,423.		
b PRINTING/TYPESETTING/GR	138,499.	87,492.	7,807.	43,200.
c INDIRECT BENEFIT EVENT	113,988.			113,988.
d TOUR AND COURSE EXPENSE	58,838.	58,838.		
e All other expenses	60,676.	48,325.	11,446.	905.
25 Total functional expenses. Add lines 1 through 24e	5,697,393.	3,957,559.	1,026,268.	713,566.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	401,605.	1	1,338,897.
	2 Savings and temporary cash investments	2,593,869.	2	949,396.
	3 Pledges and grants receivable, net	446,474.	3	565,516.
	4 Accounts receivable, net		4	42,699.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	255,757.	9	315,021.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 765,045.		
	b Less: accumulated depreciation	10b 138,505.		
		177,929.	10c	626,540.
	11 Investments - publicly traded securities	11,992,450.	11	12,525,719.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	897,660.	15	1,106,207.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	16,765,744.	16	17,469,995.
Liabilities	17 Accounts payable and accrued expenses	486,433.	17	229,944.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	931,332.	25	938,135.
	26 Total liabilities. Add lines 17 through 25	1,417,765.	26	1,168,079.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,580,156.	27	7,119,813.
	28 Temporarily restricted net assets	3,792,248.	28	3,206,528.
	29 Permanently restricted net assets	5,975,575.	29	5,975,575.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	15,347,979.	33	16,301,916.
	34 Total liabilities and net assets/fund balances	16,765,744.	34	17,469,995.

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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	4,241,466.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,697,393.
3	Revenue less expenses. Subtract line 2 from line 1	3	<1,455,927.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,347,979.
5	Net unrealized gains (losses) on investments	5	780,987.
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	1,628,877.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	16,301,916.

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 _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	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?		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		

Form 990 (2013)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	979,108.	3473942.	3710063.	5181318.	3450578.	16795009.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	979,108.	3473942.	3710063.	5181318.	3450578.	16795009.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3521737.
6 Public support. Subtract line 5 from line 4						13273272.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	979,108.	3473942.	3710063.	5181318.	3450578.	16795009.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	31,211.	257,123.	237,607.	240,042.	255,232.	1021215.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	45,646.	23,273.	8,966.	15,426.	110,874.	204,185.
11 Total support. Add lines 7 through 10						18020409.
12 Gross receipts from related activities, etc. (see instructions)					12	1,427,605.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	73.66 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	73.63 %
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2013

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

Name of organization

Employer identification number

MUNICIPAL ART SOCIETY OF NEW YORK

13-5562288

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

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

2 Political expenditures ▶ \$

3 Volunteer hours

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041
11-08-13

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		18,650.													
c Total lobbying expenditures (add lines 1a and 1b)		18,650.													
d Other exempt purpose expenditures		5,678,743.													
e Total exempt purpose expenditures (add lines 1c and 1d)		5,697,393.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		434,870.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>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														
g Grassroots nontaxable amount (enter 25% of line 1f)		108,718.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount			428,949.	434,870.	863,819.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,295,729.
c Total lobbying expenditures			16,650.	18,650.	35,300.
d Grassroots nontaxable amount			107,237.	108,718.	215,955.
e Grassroots ceiling amount (150% of line 2d, column (e))					323,933.
f Grassroots lobbying expenditures			1,665.		1,665.

Schedule C (Form 990 or 990-EZ) 2013

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

OMB No 1545-0047

2013Open to Public
Inspection

Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

Employer identification number

13-5562288**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<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" to Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ Nob If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	11,177,883.	10,175,212.	8,751,016.	11,429,229.	11,300,461.
b Contributions			50,000.	1,000.	
c Net investment earnings, gains, and losses	1,061,699.	1,332,137.	1,870,053.	<237,150.>	258,828.
d Grants or scholarships					
e Other expenditures for facilities and programs	396,261.	329,466.	495,857.	2,442,063.	130,060.
f Administrative expenses					
g End of year balance	11,843,321.	11,177,883.	10,175,212.	8,751,016.	11,429,229.

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

a Board designated or quasi-endowment ▶ 30.34 %

b Permanent endowment ▶ 50.45 %

c Temporarily restricted endowment ▶ 19.21 %

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

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		765,045.	138,505.	626,540.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				626,540.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description		(b) Book value
(1)	CUSTODIAL FUNDS	892,502.
(2)	SECURITY DEPOSIT	213,705.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		1,106,207.

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
	(1) Federal income taxes	
	(2) FUNDS HELD AS CUSTODIAN FOR OTHERS	892,502.
	(3) DEFERRED RENT	45,633.
	(4)	
	(5)	
	(6)	
	(7)	
	(8)	
	(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		938,135.

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 ☒

Schedule D (Form 990) 2013

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

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

1	Total revenue, gains, and other support per audited financial statements	1	7,064,735.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	780,987.
b	Donated services and use of facilities	2b	495,948.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,628,877.
e	Add lines 2a through 2d	2e	2,905,812.
3	Subtract line 2e from line 1	3	4,158,923.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	82,543.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	82,543.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,241,466.

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

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

1	Total expenses and losses per audited financial statements	1	6,110,798.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	495,948.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	495,948.
3	Subtract line 2e from line 1	3	5,614,850.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	82,543.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	82,543.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,697,393.

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:**EXPLANATION: THE INTENDED USES FOR THE ENDOWMENT FUNDS ARE AS FOLLOWS:****DORIS C. FREEDMAN ENDOWMENT FUND: THE INVESTMENT INCOME AND CAPITAL****APPRECIATION FROM THIS FUND ARE TEMPORARILY RESTRICTED FOR THE SUPPORT AND****MAINTENANCE OF THE DORIS C. FREEDMAN GALLERY. AMOUNTS RECEIVED IN EXCESS****OF SUPPORT AND MAINTENANCE ARE AVAILABLE FOR UNRESTRICTED PURPOSES.****MUNICIPAL ART SOCIETY ENDOWMENT FUND:****THE INVESTMENT INCOME AND CAPITAL APPRECIATION EARNED FROM THIS FUND MAY****BE USED BY THE SOCIETY FOR ITS UNRESTRICTED PURPOSES.****BRENDAN GILL PRIZE FUND:**

Part XIII Supplemental Information (continued)

THIS FUND WAS ESTABLISHED TO GENERATE INVESTMENT INCOME AND CAPITAL APPRECIATION THAT ARE TEMPORARILY RESTRICTED TO PROVIDE AN ANNUAL GIFT IN RECOGNITION OF AN INDIVIDUAL'S ARTISTIC ACCOMPLISHMENT IN NEW YORK CITY THAT REFLECTS CREATIVE WORK AND THE SPIRIT OF THE CITY.

RALPH C. MENAPACE FELLOWSHIP:

THE INVESTMENT INCOME AND CAPITAL APPRECIATION FROM THIS FUND ARE TEMPORARILY RESTRICTED TO PAY THE COST OF A FELLOW TO PERFORM VARIOUS LEGAL SERVICES FOR THE SOCIETY.

TUCKER ASHWORTH FELLOWSHIP:

INVESTMENT INCOME AND CAPITAL APPRECIATION FROM THIS FUND ARE TEMPORARILY RESTRICTED FOR A FELLOWSHIP TO A COLLEGE STUDENT OR RECENT GRADUATE TO ASSIST IN A PROJECT USING THE SOCIETY'S RESOURCES.

WOODRUFF/WORTH MONUMENT FUND:

THE INVESTMENT INCOME AND CAPITAL APPRECIATION GENERATED BY THIS FUND ARE TEMPORARILY RESTRICTED TO PROVIDE MAINTENANCE FOR THE GENERAL WORTH MONUMENT LOCATED IN MANHATTAN.

PART X, LINE 2:

EXPLANATION: MANAGEMENT HAS DETERMINED THAT THE SOCIETY HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

LEASE SURRENDER 1,628,877.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

Employer identification number

MUNICIPAL ART SOCIETY OF NEW YORK

13-5562288

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE	0	0	CONFERENCE	CONFERENCE CONCERNING RESILIENCE OF GLOBAL CITIES	26,684.
3 a Sub-total	0	0			26,684.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			26,684.

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

Schedule F (Form 990) 2013

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	JANE'S WALK PROJECT	45,000	CHECK	0		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 1

3 Enter total number of other organizations or entities 1

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) ☐ Yes ☒ No

Schedule F (Form 990) 2013

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region); Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

EXPLANATION: THE GRANT FOR THE JANE'S WALK PROJECT WAS MONITORED BY A FORMAL AGREEMENT BETWEEN THE MUNICIPAL ART SOCIETY OF NEW YORK AND TIDES CANADA INITIATIVES SOCIETY. FUNDS WERE DISTRIBUTED AFTER RECEIVING AN INVOICE FROM TIDES CANADA THAT DETAILED DELIVERABLES ACHIEVED AND THEIR RELATED COSTS.

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

Employer identification number

13-5562288

Part I

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

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

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

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ No

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

[illegible]

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

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

	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
	GALA (event type)	(event type)	NONE (total number)	
Revenue				
1 Gross receipts	1,028,853.			1,028,853.
2 Less: Contributions	913,319.			913,319.
3 Gross income (line 1 minus line 2)	115,534.			115,534.
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages	85,888.			85,888.
8 Entertainment				
9 Other direct expenses	29,646.			29,646.
10 Direct expense summary. Add lines 4 through 9 in column (d)				115,534.
11 Net income summary. Subtract line 10 from line 3, column (d)				0.

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

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <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 operates gaming activities: _____

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information.

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer

☐ Employee

☐ Independent contractor

- 17 Mandatory distributions.

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

b Enter the amount of distributions required under state law 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 complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

Part I General Information on Grants and Assistance

Employer identification number
13-5562288

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VAN ALLEN INSTITUTE 30 WEST 22ND STREET, 4TH FLOOR NEW YORK, NY 10010	13-1655152	501(C)(3)	308,685.	0.			SUPPORT FOR RESILIENCE PROGRAMMING
REGIONAL PLAN ASSOCIATION 4 IRVING PLACE, FLOOR 7 NEW YORK, NY 10003	13-1624154	501(C)(3)	152,097.	0.			SUPPORT OF RESILIENCE PROGRAMMING
HISTORIC DISTRICTS COUNCIL 232 EAST 11TH STREET, 4TH FLOOR NEW YORK, NY 10003	13-3389566	501(C)(3)	49,657.	0.			SUPPORT OF AWARD NAMED FOR ELLIOT WILLENSKY
WHAT WOULD JANE DO, LLC 3249 CASITAS AVENUE, SUITE #206 LOS ANGELES, CA 90039	20-4402490		53,010.	0.			FISCAL AGENCY FOR DOCUMENTARY FILM
475 MADISON AVENUE CORPORATION C/O MUNICIPAL ARTS SOCIETY 488 MADISON AVE, #1900 - NEW YORK, NY 10022	13-2983824	501(C)(3)	26,499.	0.			SUPPORT FOR GENERAL OPERATION

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

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.

4.

Schedule I (Form 990) (2013)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
STUBBS DAVID AWARD	1	1,000.	0.		
BRENDAN GILL PRIZE	1	7,500.	0.		
WANGARI MAATHAI AWARD	2	20,000.	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:

EXPLANATION: THE GRANTS WERE MONITORED THROUGH SITE VISITS AND EXTENSIVE CONVERSATIONS WITH THE GRANTEES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

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

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Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

Employer identification number

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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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes 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 in 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.

☒ Compensation committee

☐ Independent compensation consultant

☒ Form 990 of other organizations

☐ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

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

a Receive a severance payment or change-of-control payment?

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) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

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

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2013

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.

Area with horizontal lines for supplemental information.

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.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

Employer identification number
13-5562288

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

DESIGN AND PRESERVATION.

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

PRIORITIES THROUGHOUT THE YEAR.

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

MAS CONTINUES TO HOST A GROWING STABLE OF TOURS, LECTURES, DISCUSSIONS, AND AWARDS PROGRAMS YEAR-ROUND THAT EDUCATE NEW YORKERS ON TOPICS RELEVANT TO BUILDING A MORE RESILIENT AND LIVABLE CITY. MAS'S HIGHLY SUCCESSFUL WALKING TOURS PROGRAM INCLUDED MORE THAN 500 GUIDED WALKS IN 2014, EXPLORING HISTORICAL, ARCHITECTURAL, CULTURAL, AND ARTISTIC TOPICS ACROSS THE FIVE BOROUGHES. IN ADDITION TO OUR WEEKLY TOURS LED BY EXPERTS IN THE FIELD, MAS ORGANIZED JANE'S WALK NYC IN MAY - A WEEKEND OF 100+ FREE WALKS IN ALL FIVE BOROUGHES HOSTED BY NEIGHBORHOOD ENTHUSIASTS AND EXPERTS IN LOCAL HISTORY. MOREOVER, MAS'S PUBLIC EVENTS, INCLUDING, "CHARTING THE ROAD TO RESILIENCE," "PITCHING THE CITY," AND "DESIGN CHALLENGE FOR A NEW PENN STATION AND MADISON SQUARE GARDEN," OFFERED NEW YORKERS THE OPPORTUNITY TO LEARN ABOUT PRESSING ISSUES WHICH IMPACT THE CITY'S FUTURE. IN 2014, WE HOSTED PUBLIC ARTS FORUM EVENTS, WHICH CONVENED THOUGHT-LEADERS AND EDUCATORS THROUGHOUT THE CITY TO DISCUSS ART AND RESILIENCE, DESIGN, AND ARCHITECTURE. MAS ALSO CONDUCTED RESEARCH INTO THE ARTS AND CULTURAL LANDSCAPE IN THE BROWNSVILLE NEIGHBORHOOD OF BROOKLYN IN ORDER TO BETTER INFORM OUR CULTURE AS CATALYST PROGRAM, WHICH LEVERAGES THE ARTS AS A TOOL FOR COMMUNITY REVITALIZATION AND RECOVERY.

Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

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13-5562288

EXPENSES \$ 780,750. INCLUDING GRANTS OF \$ 124,509. REVENUE \$ 201,557.

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THE MUNICIPAL ART SOCIETY OF NEW YORK "MAS" SHALL HAVE CLASSES OF MEMBERS AS MAY BE DETERMINED FROM TIME TO TIME BY A RESOLUTION OF THE BOARD OF DIRECTORS. THE DESIGNATIONS AND CHARACTERISTICS OF EACH CLASS AND THE QUALIFICATIONS AND RIGHTS OF, AND THE LIMITATIONS UPON, THE MEMBERS OF EACH CLASS SHALL BE SET FORTH IN A RESOLUTION OF THE BOARD. THE ANNUAL MEETING OF THE MEMBERS OF MAS SHALL BE HELD EACH YEAR AS SOON AS PRACTICABLE AFTER THE END OF THE FISCAL YEAR AS DETERMINED BY THE BOARD. A CORPORATION, INDIVIDUAL, OR GROUP OF INDIVIDUALS CAN BECOME A MEMBER OF MAS UPON PAYMENT OF MEMBERSHIP FEES. MEMBERSHIP CLASSES ARE AS FOLLOWS: INDIVIDUAL MEMBERSHIPS, FAMILY MEMBERSHIPS, CORPORATE MEMBERSHIPS, CORPORATE PATRON MEMBERSHIPS, CORPORATE BENEFACTOR MEMBERSHIPS, SUSTAINING MEMBERSHIPS, CONTRIBUTING MEMBERSHIPS, URBANIST MEMBERSHIPS, SPONSORING MEMBERSHIPS, SENIOR MEMBERSHIPS, STUDENT MEMBERSHIPS, RICHARD MORRIS HUNT PATRONS PROGRAM MEMBERSHIPS, RICHARD MORRIS HUNT PRESIDENT'S CIRCLE MEMBERSHIPS, AND CHAIRMAN'S CIRCLE MEMBERSHIPS.

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: THE ANNUAL MEETING OF THE MEMBERS OF MAS SHALL BE HELD EACH YEAR AS SOON AS PRACTICABLE AFTER THE END OF THE FISCAL YEAR AS DETERMINED BY THE BOARD. THE ANNUAL MEETING AND SPECIAL MEETINGS OF THE MEMBERS OF MAS SHALL BE HELD AS SUCH PLACE IN THE CITY OF NEW YORK AS MAY BE DESIGNATED BY THE BOARD. NOTICE OF THE TIME AND PLACE, AND IN THE CASE OF SPECIAL MEETINGS, THE PURPOSE, OF EACH MEETING OF THE MEMBERS SHALL BE GIVEN BY THE SECRETARY TO EACH MEMBER IN GOOD STANDING AS OF THE DATE THE NOTICE IS MAILED OR TRANSMITTED, OR BY PUBLICATION. THE SECRETARY SHALL INCLUDE IN

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THE NOTICE OF EACH ANNUAL MEETING GIVEN TO THE MEMBERS THE SLATE OF
NOMINEES FOR DIRECTORS. ALL MEMBERS, REGARDLESS OF CLASS, HAVE THE
AUTHORITY TO ELECT THE CANDIDATES ON THE SLATE FOR POSITIONS ON THE BOARD
OF DIRECTORS. NO OTHER NOMINATIONS FOR THE BOARD SHALL BE CONSIDERED AT THE
ANNUAL MEETING EXCEPT THOSE APPROVED BY THE BOARD OF DIRECTORS, UNLESS SUCH
ADDITIONAL NOMINATIONS ARE MADE BY WRITTEN PETITION SIGNED BY AT LEAST
TWENTY (20) MEMBERS OF MAS AND PRESENTED TO THE SECRETARY AT LEAST TEN (10)
DAYS PRIOR TO THE SCHEDULED TIME OF THE ANNUAL MEETING.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: ALL RESOLUTIONS AND ELECTIONS AT ANY MEETING SHALL BE BY
MAJORITY VOTE OF THE MEMBERS PRESENT IN PERSON OR BY PROXY. NO PROXY SHALL
BE DEEMED OPERATIVE UNLESS SIGNED BY THE MEMBER AND FILED WITH THE
SECRETARY OF MAS AT LEAST ONE DAY IN ADVANCE OF THE DATE OF THE MEETING;
PROVIDED, HOWEVER, THAT THE SECRETARY, AT HIS OR HER ABSOLUTE DISCRETION,
MAY WAIVE THIS REQUIREMENT AS TO ANY MEETING. EACH PROXY SHALL BE LIMITED
TO THE NEXT SCHEDULED MEETING AND THE STATED PURPOSE THEREOF.

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

EXPLANATION: THE ORGANIZATION HAS ITS FORM 990 PREPARED BY AN OUTSIDE
ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE
THAT THE ACCOUNTING INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE
FORM 990 HAS BEEN PREPARED, REVIEWED BY MANAGEMENT AND IS READY TO BE FILED
WITH THE INTERNAL REVENUE SERVICE, IT IS SUBMITTED TO THE AUDIT COMMITTEE
FOR REVIEW. AFTER REVIEW BY THE AUDIT COMMITTEE, IT IS SENT ELECTRONICALLY
TO MEMBERS OF THE ORGANIZATIONS GOVERNING BODY FOR ANY COMMENTS PRIOR TO
ITS SUBMISSION. ANY COMMENTS ARE THEN GROUPED, SUMMARIZED AND PROVIDED TO
MANAGEMENT PERSONNEL IN CHARGE OF FILING THE RETURN FOR THEIR REVIEW. EACH

Name of the organization

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ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED AND
APPROVED FOR FILING.

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

EXPLANATION: THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY THAT IS
APPLICABLE TO ALL DIRECTORS, OFFICERS AND KEY EMPLOYEES. EACH COVERED
PERSON IS REQUIRED TO RECEIVE A COPY OF THE POLICY AND TO DISCLOSE ANY
CONFLICT OF INTEREST TO THE CHAIRPERSON OF THE AUDIT COMMITTEE OR TO THE
CHAIRPERSON OF THE BOARD. AFTER ANY DISCUSSION OF THE CONFLICTING INTEREST
BETWEEN THE INTERESTED PERSON AND THE BOARD OR A COMMITTEE OF THE BOARD
AND THE GENERAL COUNSEL OF THE ORGANIZATION, THE GENERAL COUNSEL SHALL
DECIDE IF A CONFLICT OF INTEREST EXISTS. IF THE GENERAL COUNSEL IS THE
INDIVIDUAL WITH THE POTENTIAL CONFLICT OF INTEREST, THE PRESIDENT AND THE
EXECUTIVE DIRECTOR SHALL CONSULT WITH EACH OTHER AND DECIDE IF A CONFLICT
EXISTS. IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE INTERESTED
PERSON SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON,
THE TRANSACTION OR ARRANGEMENT INVOLVING THE CONFLICT OF INTEREST AND IS
PROHIBITED FROM MAKING ANY ATTEMPT TO INFLUENCE IMPROPERLY THE DELIBERATION
OR VOTING ON THE MATTER GIVING RISE TO THE CONFLICT. EACH DIRECTOR AND
OFFICER IS REQUIRED TO SIGN AN ANNUAL STATEMENT ACKNOWLEDGING THE
OBLIGATION TO DISCLOSE ANY CONFLICT OF INTEREST.

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

EXPLANATION: THE ORGANIZATION HAS ESTABLISHED A WRITTEN COMPENSATION POLICY
FOR THEIR COMPENSATION COMMITTEE TO FOLLOW IN ESTABLISHING THE COMPENSATION
FOR THE PRESIDENT AND DIRECT REPORTS. THE POLICY MANDATES THAT EXECUTIVE
COMPENSATION BE PERIODICALLY REVIEWED BY THE COMPENSATION COMMITTEE. IN
ADDITION, THE APPROVING COMPENSATION COMMITTEE REVIEWS APPROPRIATE AND

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ADEQUATE DATA TO DETERMINE THE REASONABLENESS OF THE COMPENSATION BEING CONSIDERED. THE COMPENSATION COMMITTEE USES A VARIETY OF INFORMATION AND STUDIES THAT ARE AVAILABLE TO DETERMINE THAT THE APPROPRIATE LEVEL OF COMPENSATION IS BEING PAID TO ITS EXECUTIVES. THE COMPENSATION COMMITTEE'S DECISION ON THE AMOUNT OF COMPENSATION PAID IS DOCUMENTED IN A CONTEMPORANEOUSLY WRITTEN FORMAT AND DOCUMENTS THE DATE OF THE DECISION, THE MEMBERS PRESENT DURING THE DECISION AND THOSE WHO VOTED ON IT, THE COMPENSATION THAT WAS APPROVED AND THE COMPARABLE DATA USED AND RELIED UPON TO MAKE THE DECISION.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THE ORGANIZATION MAKES AVAILABLE ITS FORM 990 WITH GUIDESTAR.ORG. SUMMARY OF ITS FINANCIAL STATEMENTS ARE INCLUDED IN ITS ANNUAL REPORT, WHICH IS AVAILABLE ON ITS WEBSITE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PRODUCTION COSTS FOR SUMMIT NYC:

PROGRAM SERVICE EXPENSES	317,509.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	317,509.

SUMMIT CONSULTANTS:

PROGRAM SERVICE EXPENSES	11,269.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	11,269.

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ANNUAL LIVABILITY SURVEY:

PROGRAM SERVICE EXPENSES	52,188.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	52,188.

WEB SITE CONSULTANT:

PROGRAM SERVICE EXPENSES	16,585.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	16,585.

COMMITTEE FOR URBAN ENTREPRENEURSHIP MEDIA:

PROGRAM SERVICE EXPENSES	2,500.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,500.

SOFTWARE LICENSING FEES:

PROGRAM SERVICE EXPENSES	402.
MANAGEMENT AND GENERAL EXPENSES	57,503.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	57,905.

IDEAS FOR NY LEADERSHIP:

PROGRAM SERVICE EXPENSES	200.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.

Name of the organization

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TOTAL EXPENSES	200.
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ASSOCIATION FOR PUBLICLY OWNED PRIVATE SPACES CONSULTING :

PROGRAM SERVICE EXPENSES	8,750.
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MANAGEMENT AND GENERAL EXPENSES	0.
---------------------------------	----

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	8,750.
----------------	--------

CONSULTING FOR CIVIC ASSETS PROJECT:

PROGRAM SERVICE EXPENSES	30,000.
--------------------------	---------

MANAGEMENT AND GENERAL EXPENSES	0.
---------------------------------	----

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	30,000.
----------------	---------

RESILIENCE PROJECTS COSTS:

PROGRAM SERVICE EXPENSES	93,768.
--------------------------	---------

MANAGEMENT AND GENERAL EXPENSES	0.
---------------------------------	----

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	93,768.
----------------	---------

STRATEGIC PLANNING CONSULTING:

PROGRAM SERVICE EXPENSES	0.
--------------------------	----

MANAGEMENT AND GENERAL EXPENSES	30,000.
---------------------------------	---------

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	30,000.
----------------	---------

ARCHIVE PROJECT:

PROGRAM SERVICE EXPENSES	16,000.
--------------------------	---------

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MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 16,000.

IT CONSULTING:

PROGRAM SERVICE EXPENSES 0.

MANAGEMENT AND GENERAL EXPENSES 4,013.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 4,013.

EVENT PRODUCTION COSTS FOR ADVOCACY PROJECTS:

PROGRAM SERVICE EXPENSES 16,903.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 16,903.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 657,590.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GAIN OF SURRENDER OF LEASE 1,628,877.

**Department of the Treasury
Internal Revenue Service**

Name of the organization

MUNICIPAL ART SOCIETY OF NEW YORK

Employer identification number
13-556288

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

[illegible]

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.

[illegible]

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

Schedule R (Form 990) 2013.

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

1 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?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s 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) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) 457 MADISON AVENUE	C	26,499.	
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slightly textured appearance and some minor discoloration or shadows, suggesting it's a physical scan. There is no handwriting or other markings on the page.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	MACHINERY & EQUIPMENT FURNITURE AND EQUIPMENT * 990 PAGE 10 TOTAL MACHINERY & EQUIP * GRAND TOTAL 990 PAGE 10 DEPR		VARIES	5.00	16	765,045.			765,045.	138,505.		65,068.
						765,045.		0.	765,045.	138,505.	0.	65,068.
						765,045.		0.	765,045.	138,505.	0.	65,068.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3 month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	MUNICIPAL ART SOCIETY OF NEW YORK	13-5562288
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	488 MADISON AVENUE, NO. 1900	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	NEW YORK, NY 10022	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

ROBERT LIBBEY

- The books are in the care of ☒ 111 W 57TH STREET - NEW YORK, NY 10019

Telephone No ☒ 212-935-3960

Fax No ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until AUGUST 15, 2015
- 5 For calendar year 2013, or other tax year beginning OCT 1, 2013, and ending SEP 30, 2014
- 6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

- 7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO COMPLETE THE RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐

Title ☐ PRESIDENT

Date ☐

Form 8868 (Rev. 1-2014)

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► File a separate application for each return

► Information about Form 8868 and its instructions is at www.irs.gov/form8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number
File by the due date for filing your return. See instructions.	MUNICIPAL ART SOCIETY OF NEW YORK	Employer identification number (EIN) or 13-5562288
	Number, street, and room or suite no. If a P.O. box, see instructions 111 WEST 57TH STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10019	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

ROBERT LIBBEY

- The books are in the care of ►
- 111 W 57TH STREET - NEW YORK, NY 10019**

Telephone No ► **212-935-3960**

Fax No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **MAY 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year _____ or
- ☒ tax year beginning **OCT 1, 2013**, and ending **SEP 30, 2014**

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.