

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning **SEP 1, 2019** and ending **AUG 31, 2020**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEW YORK SHAKESPEARE FESTIVAL		D Employer identification number 13-1844852
	Doing business as THE PUBLIC THEATER; JOE'S PUB		E Telephone number (212) 539-8500
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	425 LAFAYETTE STREET		G Gross receipts \$ 66,055,174.
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10003		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
F Name and address of principal officer: PATRICK WILLINGHAM SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. (see instructions)	
J Website: WWW.PUBLICTHEATER.ORG		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1954	M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O
	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 45
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 43
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 1703
	6 Total number of volunteers (estimate if necessary) 6 43
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
b Net unrelated business taxable income from Form 990-T, line 39 7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 45,866,012. Prior Year 33,473,363. Current Year
	9 Program service revenue (Part VIII, line 2g) 14,820,130. 8,271,831.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,979,404. 3,849,698.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 25,057,264. 9,928,159.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 88,722,810. 55,523,051.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 769,950. 923,135.
Expenses	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) 34,919,176. 34,095,057.
	16a Professional fundraising fees (Part IX, column (A), line 11e) 628,451. 491,358.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,676,496.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 20,612,926. 16,597,417.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 56,930,503. 52,106,967.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12 31,792,307. 3,416,084.
	20 Total assets (Part X, line 16) 115,535,167. Beginning of Current Year 119,388,743. End of Year
	21 Total liabilities (Part X, line 26) 15,609,820. 19,583,813.
	22 Net assets or fund balances. Subtract line 21 from line 20 99,925,347. 99,804,930.

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	06.30.2021
	PATRICK WILLINGHAM, EXECUTIVE DIRECTOR	Date

Paid Preparer Use Only	Print/Type preparer's name MICHAEL WALLACE	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00881958
	Firm's name ▶ LUTZ AND CARR, CPAS LLP	Firm's EIN ▶ 13-1655065	Phone no. 212-697-2299		
Firm's address ▶ 551 FIFTH AVENUE, SUITE 400		NEW YORK, NY 10176			

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

Part III Statement of Program Service Accomplishments

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

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

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] 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? [X] 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 \$ 22,124,091. including grants of \$) (Revenue \$ 6,013,216.) DOWNTOWN SEASON

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

TWO PLAYS RECEIVED THEIR WORLD PREMIERE - RICHARD NELSON'S THE MICHAELS AND JESSICA BLANK AND ERIC JENSEN'S COAL COUNTRY. THE SEASON ALSO INCLUDED THE NEW YORK PREMIERE OF SOFT POWER BY DAVID HENRY HWANG AND JEANINE TESORI, AND REVIVALS OF TONY KUSHNER'S A BRIGHT ROOM CALLED DAY

4b (Code:) (Expenses \$ 762,578. including grants of \$) (Revenue \$) SHAKESPEARE IN THE PARK

FREE SHAKESPEARE IN THE PARK AT THE DELACORTE THEATER IN CENTRAL PARK EMBODIES THE PUBLIC THEATER'S MISSION TO OFFER THE HIGHEST QUALITY WORK TO EVERYONE, FREE OF CHARGE. SINCE ITS INCEPTION MORE THAN 5 MILLION PEOPLE HAVE ENJOYED PERFORMANCES BY BOTH EMERGING AND WORLD-RENOWNED ARTISTS. CONTINUING A LONG-HELD TRADITION, ALL TICKETS FOR SHAKESPEARE IN THE PARK ARE OFFERED FREE OF CHARGE THROUGH A VARIETY OF DISTRIBUTION METHODS IN ALL FIVE BOROUGHES DESIGNED TO MAXIMIZE ACCESSIBILITY. FOR PATRONS WITH HEARING AND VISION IMPAIRMENTS, THE PUBLIC THEATER OFFERS A SIGN-INTERPRETED, OPEN-CAPTIONED AND AUDIO-DESCRIBED PERFORMANCE FOR EACH PRODUCTION. THE 2020 FREE

4c (Code:) (Expenses \$ 4,050,487. including grants of \$) (Revenue \$ 1,728,891.) JOE'S PUB

ONE OF NEW YORK CITY'S MOST CELEBRATED VENUES FOR EMERGING AND ESTABLISHED PERFORMANCE ARTISTS, JOE'S PUB IS COMMITTED TO REFLECTING THE DIVERSE COMMUNITY THAT IT REPRESENTS IN ITS AUDIENCE AND ON ITS STAGE BY PROGRAMMING A VARIETY OF HIGH-QUALITY PERFORMANCES, WHILE KEEPING TICKET PRICES AT A MINIMUM. NAMED FOR PUBLIC THEATER FOUNDER JOE PAPP, JOE'S PUB DEBUTED IN 1998 AND PLAYS A VITAL ROLE IN THE PUBLIC THEATER'S MISSION OF SUPPORTING YOUNG ARTISTS WHILE PROVIDING ESTABLISHED ARTISTS WITH AN INTIMATE SPACE TO PERFORM AND DEVELOP NEW WORK. AS PART OF THE PUBLIC THEATER'S 2019-20 PROGRAMMING DOWNTOWN AT 425 LAFAYETTE STREET, JOE'S PUB PRESENTED TALENT FROM ALL OVER THE

4d Other program services (Describe on Schedule O.) (Expenses \$ 10,737,004. including grants of \$ 923,135.) (Revenue \$ 730,976.)

4e Total program service expenses 37,674,160.

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	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? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	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? <i>If "Yes," complete Schedule D, Part I</i>	6	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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 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? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e 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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	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? <i>If "Yes," complete Schedule G, Part I</i>	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 on Schedule O.	45	
b	Enter the number of voting members included on line 1a, above, who are independent	43	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		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?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		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	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NY, CT, NJ, PA, CA, GA, CO**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **DANIEL WILLIAMS, SR. DIR. OF FINANCE AND ADMINISTRATION - 212-539-8500
425 LAFAYETTE STREET, NEW YORK, NY 10003**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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) ARIELLE TEPPE CHAIR	7.00	X		X				0.	0.	0.
(2) PAT FILI-KRUSHEL VICE CHAIR	4.00	X		X				0.	0.	0.
(3) ANNE CLARKE WOLFF TREASURER	4.00	X		X				0.	0.	0.
(4) MATTHEW PINCUS SECRETARY	2.00	X		X				0.	0.	0.
(5) KWAME ANTHONY APPIAH BOARD MEMBER	1.00	X						0.	0.	0.
(6) PATTY BAKER BOARD MEMBER	1.00	X						0.	0.	0.
(7) RENEE BEAUMONT BOARD MEMBER	1.00	X						0.	0.	0.
(8) ANDREA E. BERNSTEIN BOARD MEMBER	2.00	X						0.	0.	0.
(9) JASON BLUM BOARD MEMBER	1.00	X						0.	0.	0.
(10) ZACH BUCHWALD BOARD MEMBER	2.00	X						0.	0.	0.
(11) LEE DANIELS BOARD MEMBER	1.00	X						0.	0.	0.
(12) GORDON J. DAVIS, ESQ. BOARD MEMBER	3.00	X						0.	0.	0.
(13) DAVID DROGA BOARD MEMBER	1.00	X						0.	0.	0.
(14) SUSAN EDELSTEIN BOARD MEMBER	1.00	X						0.	0.	0.
(15) ERIC ELLENBOGEN BOARD MEMBER	1.00	X						0.	0.	0.
(16) HILARY C. FESHBACH BOARD MEMBER	1.00	X						0.	0.	0.
(17) TOM FINKELPEARL BOARD MEMBER	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) CANDIA FISHER BOARD MEMBER	1.00	X						0.	0.	0.
(19) FAITH GAY BOARD MEMBER	1.00	X						0.	0.	0.
(20) DANAI GURIRA BOARD MEMBER	1.00	X						0.	0.	0.
(21) ANNE HATHAWAY BOARD MEMBER	1.00	X						0.	0.	0.
(22) DEBBY LANDESMAN BOARD MEMBER	1.00	X						0.	0.	0.
(23) ASHLEY LEEDS BOARD MEMBER	1.00	X						0.	0.	0.
(24) KENNY LEON BOARD MEMBER	1.00	X						0.	0.	0.
(25) LUIS MIRANDA JR. BOARD MEMBER	2.00	X						0.	0.	0.
(26) GAIL MERRIFIELD PAPP BOARD MEMBER	1.00	X						0.	0.	0.
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								3,369,535.	0.	572,957.
d Total (add lines 1b and 1c)								3,369,535.	0.	572,957.

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 **38**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
SHAWMUT DESIGN AND CONSTRUCTION 560 HARRISON AVENUE, BOSTON, MA 02118	DESIGN AND CONSTRUCTION SERVICE	9,391,107.
ZUBATKIN OWNER REPRESENTATION, LLC, 333 WEST 52ND STREET, 6TH FLOOR, NEW YORK, NY	OWNERS REPRESENTATION SERVI	1,027,879.
BIG ARCHITECHTURE D.P.C., 45 MAIN STREET, SUITE 900, BROOKLYN, NY 11201	ARCHITECTURE AND DESIGN SERVICES	907,909.
MASQUE SOUND & RECORDING CORP., 21 EAST UNION AVENUE, EAST RUTHERFORD, NJ 07073	THEATRICAL EQUIPMENT RENTALS AND PURCHAS	637,458.
CSS SECURITY, 2753 NORTH JERUSALEM, SUITE D, EAST MEADOW, NY 11554	ONSITE SECURITY SERVICES	583,612.

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 **45**

SEE PART VII, SECTION A CONTINUATION SHEETS

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 (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) HANS MORRIS BOARD MEMBER	1.00	X						0.	0.	0.
(28) JAMES MURDOCH BOARD MEMBER	1.00	X						0.	0.	0.
(29) JULIA PERSHAN BOARD MEMBER	1.00	X						0.	0.	0.
(30) JULIO PETERSON BOARD MEMBER	2.00	X						0.	0.	0.
(31) CHARLOTTE RELYEA BOARD MEMBER	1.00	X						0.	0.	0.
(32) JULIE RICE BOARD MEMBER	1.00	X						0.	0.	0.
(33) JANICE COOK ROBERTS BOARD MEMBER	1.00	X						0.	0.	0.
(34) WENDI ROSE BOARD MEMBER	1.00	X						0.	0.	0.
(35) LIZANNE ROSENSTEIN BOARD MEMBER	1.00	X						0.	0.	0.
(36) MARK ROSENTHAL BOARD MEMBER	1.00	X						0.	0.	0.
(37) JOSH SAPAN BOARD MEMBER	1.00	X						0.	0.	0.
(38) ALEXANDRA SHIVA BOARD MEMBER	2.00	X						0.	0.	0.
(39) JIM STEINBERG BOARD MEMBER	1.00	X						0.	0.	0.
(40) LAURE SUDREAU BOARD MEMBER	1.00	X						0.	0.	0.
(41) STEVEN TAUB BOARD MEMBER	1.00	X						0.	0.	0.
(42) TERESA TSAI BOARD MEMBER	1.00	X						0.	0.	0.
(43) REGGIE VAN LEE BOARD MEMBER	1.00	X						0.	0.	0.
(44) GRACE LYU-VOLCKHAUSEN BOARD MEMBER	1.00	X						0.	0.	0.
(45) SAM WATERSTON BOARD MEMBER	1.00	X						0.	0.	0.
(46) AUDREY WILF BOARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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 (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			
(47) TIMOTHY WILKINS BOARD MEMBER	2.00	X						0.	0.	0.
(48) FRANCES WILKINSON BOARD MEMBER	1.00	X						0.	0.	0.
(49) ALISA AMAROSA WOOD BOARD MEMBER	1.00	X						0.	0.	0.
(50) PATRICK WILLINGHAM EXECUTIVE DIRECTOR	40.00	X		X				456,121.	0.	27,413.
(51) PAUL J EUSTIS ARTISTIC DIRECTOR	40.00	X		X				827,806.	0.	222,980.
(52) PATRICIA HUIE CHIEF FINANCIAL OFFICER	40.00			X				191,226.	0.	23,420.
(53) THOMAS MCCANN CHIEF MARKETING OFFICER	40.00				X			181,248.	0.	17,858.
(54) SHANNON S. THAKE-KRIEGSMANN SENIOR DIR. OF ARTISTIC PROGRAMS	40.00				X			181,263.	0.	39,258.
(55) LAURENCE JAHNS CHIEF ADVANCEMENT OFFICER	40.00				X			459,593.	0.	42,975.
(56) JEREMY ADAMS MANAGING DIRECTOR	40.00				X			188,627.	0.	24,944.
(57) RUTH STERNBERG PRODUCTION EXECUTIVE	40.00					X		203,583.	0.	49,605.
(58) MANDY HACKETT ASSOCIATE ARTISTIC DIR.	40.00					X		195,188.	0.	39,603.
(59) ALEX TONETTA ARTISTIC CONTENT CURATOR	40.00					X		169,963.	0.	16,079.
(60) KIERAN MCGRATH SENIOR DIRECTOR, HUMAN RESOURCES	40.00					X		158,926.	0.	23,477.
(61) LAURA O'CONNELL DIR. OF CAPITAL PROJECTS	40.00					X		155,991.	0.	45,345.
Total to Part VII, Section A, line 1c								3,369,535.		572,957.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,105,075.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	911,208.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	30,457,080.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 908,009.				
	h Total. Add lines 1a-1f		33,473,363.				
	Program Service Revenue	2 a BOX OFFICE INCOME	Business Code				
		711110	5,262,292.	5,262,292.			
b CO-PRODUCTION FEES, ENHANCEMENT I		900099	2,996,079.	2,996,079.			
c WORKSHOPS/EVENTS		900099	13,460.	13,460.			
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f		8,271,831.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		871,068.			871,068.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		9,417,252.			9,417,252.	
	6 a Gross rents	6a	(i) Real	309,655.			
			(ii) Personal				
	b Less: rental expenses ...	6b	0.				
	c Rental income or (loss)	6c	309,655.				
	d Net rental income or (loss)		309,655.			309,655.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	13,452,138.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	10,473,508.				
	c Gain or (loss)	7c	2,978,630.				
	d Net gain or (loss)		2,978,630.			2,978,630.	
8 a Gross income from fundraising events (not including \$ 2,105,075. of contributions reported on line 1c). See Part IV, line 18	8a		58,615.				
			58,615.				
b Less: direct expenses	8b	58,615.					
c Net income or (loss) from fundraising events		0.					
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS INCOME	Business Code					
		900099	201,252.	201,252.			
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d		201,252.					
12 Total revenue. See instructions		55,523,051.	8,473,083.	0.	13,576,605.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	550,135.	550,135.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	373,000.	373,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,836,234.	2,100,940.	465,403.	269,891.
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	24,194,449.	17,922,030.	3,970,116.	2,302,303.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,424,099.	1,795,651.	397,775.	230,673.
9 Other employee benefits	2,388,337.	1,769,160.	391,907.	227,270.
10 Payroll taxes	2,251,938.	1,668,122.	369,525.	214,291.
11 Fees for services (nonemployees):				
a Management	1,155,592.	544,338.	598,667.	12,587.
b Legal	341,080.	124,087.	216,501.	492.
c Accounting	107,621.		107,621.	
d Lobbying	168,000.	168,000.		
e Professional fundraising services. See Part IV, line 17	491,358.			491,358.
f Investment management fees	48,853.		48,853.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	2,687,053.	2,626,029.	14,149.	46,875.
12 Advertising and promotion	874,739.	606,463.	15,076.	253,200.
13 Office expenses	995,320.	507,795.	416,704.	70,821.
14 Information technology	565,692.	233,588.	231,889.	100,215.
15 Royalties	224,897.	224,147.		750.
16 Occupancy	3,327,339.	1,929,136.	1,192,467.	205,736.
17 Travel	1,141,967.	905,651.	84,688.	151,628.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,292,936.	492,325.	741,285.	59,326.
23 Insurance	239,300.	13,621.	223,699.	1,980.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRODUCTION COSTS	2,933,012.	2,930,865.	2,000.	147.
b MISCELLANEOUS	263,829.	105,864.	154,098.	3,867.
c PROFESSIONAL DEVELOPMENT	172,299.	83,213.	56,000.	33,086.
d BAD DEBT	57,888.		57,888.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	52,106,967.	37,674,160.	9,756,311.	4,676,496.
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 Sheet

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

		(A)		(B)		
		Beginning of year		End of year		
Assets	1 Cash - non-interest-bearing	4,161,293.	1	6,238,808.		
	2 Savings and temporary cash investments	32,498,379.	2	26,291,815.		
	3 Pledges and grants receivable, net	25,041,168.	3	28,145,691.		
	4 Accounts receivable, net	1,757,082.	4	641,025.		
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5			
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6			
	7 Notes and loans receivable, net		7			
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges	1,970,541.	9	949,937.		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 23,696,227.				
	b Less: accumulated depreciation	10b 8,386,784.	15,463,536.	10c	15,309,443.	
	11 Investments - publicly traded securities	17,964,061.	11	18,483,276.		
	12 Investments - other securities. See Part IV, line 11	1,871,640.	12	2,155,967.		
	13 Investments - program-related. See Part IV, line 11		13			
	14 Intangible assets		14			
	15 Other assets. See Part IV, line 11	14,807,467.	15	21,172,781.		
16 Total assets. Add lines 1 through 15 (must equal line 33)	115,535,167.	16	119,388,743.			
Liabilities	17 Accounts payable and accrued expenses	4,725,683.	17	3,567,272.		
	18 Grants payable		18			
	19 Deferred revenue	2,784,723.	19	610,787.		
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22			
	23 Secured mortgages and notes payable to unrelated third parties		23			
	24 Unsecured notes and loans payable to unrelated third parties		24	4,088,989.		
	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	8,099,414.	25	11,316,765.		
	26 Total liabilities. Add lines 17 through 25	15,609,820.	26	19,583,813.		
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27 Net assets without donor restrictions	53,736,528.	27	46,449,142.		
	28 Net assets with donor restrictions	46,188,819.	28	53,355,788.		
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29 Capital stock or trust principal, or current funds		29			
	30 Paid-in or capital surplus, or land, building, or equipment fund		30			
	31 Retained earnings, endowment, accumulated income, or other funds		31			
	32 Total net assets or fund balances	99,925,347.	32	99,804,930.		
33 Total liabilities and net assets/fund balances	115,535,167.	33	119,388,743.			

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	55,523,051.
2	Total expenses (must equal Part IX, column (A), line 25)	2	52,106,967.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,416,084.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	99,925,347.
5	Net unrealized gains (losses) on investments	5	-1,790,704.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-770,827.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-974,970.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	99,804,930.

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
2b	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	
2c	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 on 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
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2019)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

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

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I**. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II**. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated**. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated**. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19140017.	26656819.	33560688.	45866012.	33473363.	158696899
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	19140017.	26656819.	33560688.	45866012.	33473363.	158696899
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)						4329489.
6 Public support. Subtract line 5 from line 4.						154367410

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	19140017.	26656819.	33560688.	45866012.	33473363.	158696899
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3608284.	13454275.	21358077.	25700833.	10597975.	74719444.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	3,909.	11,025.	10,806.	11,591.		37,331.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	213,358.	310,123.	612,504.	298,381.	201,252.	1635618.
11 Total support. Add lines 7 through 10						235089292
12 Gross receipts from related activities, etc. (see instructions)					12	62,430,307.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	65.66 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	67.91 %
16a 33 1/3% support test - 2019. 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 - 2018. 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 - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<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"/>	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. 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 - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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

Lined area for supplemental information.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Open to Public Inspection

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

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

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

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

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

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

Name of organization NEW YORK SHAKESPEARE FESTIVAL	Employer identification number 13-1844852
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2019

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 (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">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)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount				
b	Lobbying ceiling amount (150% of line 2a, column(e))				
c	Total lobbying expenditures				
d	Grassroots nontaxable amount				
e	Grassroots ceiling amount (150% of line 2d, column (e))				
f	Grassroots lobbying expenditures				

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		168,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			168,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

THE PUBLIC HAS ENGAGED VENDORS FOR LOBBYING TO SEEK FUNDING AND VARIOUS APPROVALS FOR OUR CAPITAL CAMPAIGN FROM THE CITY.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, number of easements, acreage, and expenses, and questions about monitoring and reporting.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019

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 make 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 program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	19,782,694.	20,436,220.	19,870,203.	18,574,944.	18,676,036.
b Contributions					
c Net investment earnings, gains, and losses	1,621,311.	231,474.	1,451,017.	2,180,259.	783,908.
d Grants or scholarships					
e Other expenditures for facilities and programs	-885,000.	-885,000.	-885,000.	-885,000.	-885,000.
f Administrative expenses					
g End of year balance	20,519,005.	19,782,694.	20,436,220.	19,870,203.	18,574,944.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 75.16 %
 - c Term endowment 24.84 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (i) Unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		21,298,712.	6,566,697.	14,732,015.
d Equipment		1,024,494.	789,397.	235,097.
e Other		1,373,021.	1,030,690.	342,331.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,309,443.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) CONSTRUCTION COST REIMBURSEMENT DUE FROM THE CITY OF NEW	
(2) YORK	517,393.
(3) BONDS, DEPOSITS AND OTHER ASSETS	298,808.
(4) CONSTRUCTION IN PROGRESS	20,356,580.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	21,172,781.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED PENSION LIABILITY	9,844,541.
(3) DEFERRED RENT	1,472,224.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	11,316,765.

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

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

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

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

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

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

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

Part XIII Supplemental Information.

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

PART V, LINE 4:

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

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

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

Part I Fundraising Activities. Complete if the organization answered "Yes" on 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 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
GURA ASSOCIATES LTD - 505 WEST END AVENUE, NEW YORK, NY	MAJOR GIFT CONSULTING		X	0.	295,313.	0.
COMMUNITY COUNSELLING SERVICE CO, LLC - 527 MADISON AVE,	CAPITAL CAMPAIGN ADVISING		X	0.	196,045.	0.
Total					491,358.	

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.
NY, CT, NJ, PA, CA, CO, GA

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ANNUAL GALA (event type)	BENEFIT EVENTS (event type)	NONE (total number)	
Revenue	1 Gross receipts	2,023,290.	140,400.		2,163,690.
	2 Less: Contributions	2,000,645.	104,430.		2,105,075.
	3 Gross income (line 1 minus line 2)	22,645.	35,970.		58,615.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	22,645.			22,645.
	8 Entertainment				
	9 Other direct expenses		35,970.		35,970.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				58,615.
11 Net income summary. Subtract line 10 from line 3, column (d)				0.	

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

		(a) Bingo	(b) Pull tabs/instant 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 conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

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

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

a The organization's facility	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 provide any additional information. See instructions.

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

(I) NAME OF FUNDRAISER: GURA ASSOCIATES LTD

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

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

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

Part IV Supplemental Information *(continued)*

(This area contains horizontal lines for supplemental information.)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

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

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

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 noncash assistance	(h) Purpose of grant or assistance
THE SHAKESPEARE SOCIETY OF AMERICA, INC. - 425 LAFAYETTE STREET - NEW YORK, NY 10003	13-3974836	501(C)(3)	550,135.	0.			GENERAL OPERATING SUPPORT FOR THE PERFORMANCE, COMMENTARY, AND EDUCATIONAL ACTIVITIES

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

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

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

Schedule I (Form 990) (2019)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
VAN LIER FELLOWSHIPS	2	10,000.	0.		
TOW FELLOWSHIPS	1	55,000.	0.		
FREELANCE THEATER MAKER RELIEF	308	308,000.	0.		

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

PART I, LINE 2:

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

Part IV Supplemental Information

A MULTI-YEAR BUDGET HAS BEEN INCORPORATED INTO THE AFFILIATION AGREEMENT BETWEEN NYSF AND THE SHAKESPEARE SOCIETY OF AMERICA, INC. NYSF REVIEWS THE BUDGET AND EXPENSES DURING THE YEAR. INTERIM FINANCIAL REPORTS ARE REVIEWED REGULARLY. A FINAL REPORT AND ACCOUNTING STATEMENT IS REQUIRED AT THE END OF THE YEAR.

PART II

FREELANCE THEATER MAKER RELIEF:

THE PUBLIC, IN PARTNERSHIP WITH OUR BOARD OF TRUSTEES AND DONOR COMMUNITY, OFFERED A LIMITED NUMBER OF ONE-TIME DISASTER RELIEF PAYMENTS OF \$1,000 TO FREELANCE THEATER MAKERS FROM ALL DISCIPLINES, INCLUDING, BUT NOT LIMITED TO, TECHNICIANS, CREW MEMBERS, TEACHING ARTISTS AND ARTISTS WORKING GROUP PARTICIPANTS. FUTURE RELIEF PAYMENTS WILL BE OFFERED TO PLAYWRIGHTS, ACTORS, STAGE MANAGERS, DIRECTORS, CHOREOGRAPHERS, DESIGNERS, AUDIENCE SERVICES STAFF-MEMBERS, ASL INTERPRETERS, AMONG OTHERS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2019

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

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

▶ Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number

13-1844852

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

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

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

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

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

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
1b		X
2		X
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PATRICK WILLINGHAM EXECUTIVE DIRECTOR	(i)	436,431.	0.	19,690.	14,871.	12,542.	483,534.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PAUL J EUSTIS ARTISTIC DIRECTOR	(i)	806,826.	0.	20,980.	199,566.	23,414.	1,050,786.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PATRICIA HUIE CHIEF FINANCIAL OFFICER	(i)	190,151.	0.	1,075.	11,430.	11,990.	214,646.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) THOMAS MCCANN CHIEF MARKETING OFFICER	(i)	181,248.	0.	0.	8,034.	9,824.	199,106.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SHANNON S. THAKE-KRIEGSMANN SENIOR DIR. OF ARTISTIC PROGRAMS	(i)	181,263.	0.	0.	7,898.	31,360.	220,521.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LAURENCE JAHNS CHIEF ADVANCEMENT OFFICER	(i)	430,453.	8,160.	20,980.	19,446.	23,529.	502,568.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JEREMY ADAMS MANAGING DIRECTOR	(i)	188,627.	0.	0.	14,921.	10,023.	213,571.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) RUTH STERNBERG PRODUCTION EXECUTIVE	(i)	203,583.	0.	0.	28,863.	20,742.	253,188.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MANDY HACKETT ASSOCIATE ARTISTIC DIR.	(i)	195,188.	0.	0.	13,023.	26,580.	234,791.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ALEX TONETTA ARTISTIC CONTENT CURATOR	(i)	169,963.	0.	0.	4,731.	11,348.	186,042.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) KIERAN MCGRATH SENIOR DIRECTOR, HUMAN RESOURCES	(i)	158,926.	0.	0.	2,665.	20,812.	182,403.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) LAURA O'CONNELL DIR. OF CAPITAL PROJECTS	(i)	155,991.	0.	0.	4,419.	40,926.	201,336.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

THE ARTISTIC DIRECTOR AND EXECUTIVE DIRECTOR ARE PERMITTED TO BOOK UPGRADED SEATING ON OVERNIGHT FLIGHTS THAT ARE SIX HOURS OR LONGER.

PAUL EUSTIS RECEIVED GROSS-UP PAYMENTS TO COVER IMPUTED INCOME ON CASH ALLOWANCES PROVIDED FOR HIS CONTRACTUAL LIFE INSURANCE PREMIUM PAYMENTS. PAUL EUSTIS, PATRICK WILLINGHAM, AND LAURENCE JAHNS RECEIVED GROSS-UP PAYMENTS TO COVER IMPUTED INCOME ON CASH ALLOWANCES FOR THEIR 403B ACCOUNTS.

PART I, LINE 4B:

PURSUANT TO HIS EMPLOYMENT AGREEMENT, PAUL J. EUSTIS PARTICIPATES IN AN NONQUALIFIED DEFERRED COMPENSATION ARRANGEMENT UNDER SECTION 457(F) OF THE INTERNAL REVENUE CODE, WHICH IS DESIGNED TO PROVIDE A NONQUALIFIED RETIREMENT BENEFIT UPON COMPLETION OF THE CONTRACT TERM, AND IS SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE. THE RETIREMENT BENEFIT IS BEING ACCRUED RATABLY OVER THE CONTRACT TERM. \$159,493 WAS VESTED BUT NO AMOUNTS WERE PAID DURING THE 2019 CALENDAR YEAR AND THE ACCRUAL IS BEING REPORTED AS DEFERRED COMPENSATION.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	41	908,009.	FAIR MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

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

SCHEDULE M, LINE 32B:

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number

13-1844852

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

THROUGH THE PUBLIC THEATER, SHAKESPEARE IN THE PARK AND JOE'S PUB, NYSF
IS DEDICATED TO DEVELOPING AN AMERICAN THEATER THAT IS ACCESSIBLE AND
RELEVANT TO ALL PEOPLE.

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

INNOVATIVE STAGINGS OF THE CLASSICS.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

WITH THE COVID 19 PANDEMIC MAKING IN-PERSON ACTIVITY PROHIBITED, NYSF
PROGRAMMING WAS MOVED TO DIGITAL EXPRESSIONS IN MARCH OF 2020.

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

AND FOR COLORED GIRLS WHO HAVE CONSIDERED SUICIDE / WHEN THE RAINBOW IS
ENUF BY NTOZAKE SHANGE. THE SIXTEENTH UNDER THE RADAR FESTIVAL, A
PLATFORM FOR US-BASED AND INTERNATIONAL DEVISED THEATER GROUPS,
PRESENTED THE WORK OF CONTEMPORARY THEATER COMPANIES FEATURING ARTISTS
FROM ACROSS THE US AND AROUND THE WORLD.

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

SHAKESPEARE IN THE PARK SEASON WAS CANCELED DUE TO THE COVID-19
PANDEMIC.

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

WORLD, HOSTING APPROXIMATELY 400 SHOWS AND SERVING OVER 50,000 AUDIENCE

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number

13-1844852

MEMBERS. THE DIVERSE ROSTER OF PROGRAMMING FEATURED TOP PERFORMERS FROM BROADWAY, CABARET, DANCE, WORLD, SINGER-SONGWRITER, JAZZ, COUNTRY AND INDIE GENRES.

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

COMMUNITY PROGRAMS:

MOBILE UNIT

THE MOBILE UNIT, A CONTEMPORARY VERSION OF THE PUBLIC THEATER'S INITIAL TOURING MODEL, NOT ONLY SEEKS OUT DIVERSE AUDIENCES BUT SERVES AUDIENCES WHOSE ACCESS TO ARTS EXPERIENCES ARE SEVERELY INHIBITED BY THEIR ENVIRONMENTS. THE MOBILE UNIT FOCUSES ON TOURING PRODUCTIONS TO PRISONS, HALFWAY HOUSES, COMMUNITY CENTERS AND OTHER PLACES WHERE THE MOST CRITICALLY UNDER-SERVED AND OVERLOOKED PARTS OF THE POPULATION ARE CONGREGATED. THESE PRODUCTIONS ARE THEN PRESENTED AS PART OF THE DOWNTOWN SEASON AT 425 LAFAYETTE STREET. OVER THE YEARS, THE MOBILE UNIT HAS SERVED THOUSANDS OF AUDIENCES WITH CRITICALLY ACCLAIMED PRODUCTIONS.

IN THE FALL OF 2019, THE MOBILE UNIT EMBARKED ON A THREE-WEEK, TOUR OF THE FIVE BOROUGHES, FEATURING FREE PERFORMANCES OF SHAKESPEARE'S MEASURE FOR MEASURE DIRECTED BY LA WILLIAMS.

IN 2019, WE WERE THRILLED TO CONTINUE MOBILE UNIT TOURS OF COMMISSIONED MUSIC PERFORMANCE, REACHING 3-5 VENUES. ADDITIONALLY, WE DEEPENED PARTNERSHIPS WITH THE NEW YORK CITY LIBRARY SYSTEMS IN MANHATTAN, THE BRONX, QUEENS AND BROOKLYN, THE NEW YORK CITY HOUSING AUTHORITY, AND

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

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THE CITY PARKS FOUNDATION WITH THE INTENT OF BROADENING OUR PERFORMANCE VENUES TO INCLUDE PUBLIC HOUSING, LIBRARIES AND PARKS.

PUBLIC WORKS

PUBLIC WORKS PARTNERS WITH SOCIAL SERVICE ORGANIZATIONS SERVING THOSE WHO STAND TO BENEFIT MOST FROM THE TRANSFORMATIVE POWER OF THEATER. OVER THE LAST SIX YEARS, PUBLIC WORKS HAS LED WORKSHOPS WITH ITS PARTNERS, BROUGHT THEM TO THE THEATER MANY TIMES, HELD COMMUNAL POTLUCKS, AND FORMED DEEP AND REAL RELATIONSHIPS WITH THE ORGANIZATIONS AND THEIR CLIENTS.

FOR THE 2019-2020 SEASON, PUBLIC WORKS CONTINUED TO WORK WITH FORTUNE SOCIETY (QUEENS), DREAMYARD (THE BRONX), THE BROWNSVILLE RECREATION CENTER (BROOKLYN) AS CORE COMMUNITY PARTNERS, CENTER FOR FAMILY LIFE AT SUNSET PARK (QUEENS), CASITA MARIA (BRONX), AND THE MILITARY RESILIENCE PROJECT (ALL BOROUGHES). THE CHILDREN'S AID SOCIETY (MANHATTAN) AND DOMESTIC WORKERS UNITED (STATEN ISLAND AND CITYWIDE) SUSTAINED ALUMNI RELATIONSHIPS, ENGAGING IN THE PUBLIC WORKS COMMUNITY WHILE AT THE SAME TIME MAKING ROOM TO INVITE NEW PRIMARY PARTNERS TO THE TABLE. THE SEASON CULMINATED WITH A SEVEN-NIGHT RUN OF THE ORIGINAL MUSICAL OF DISNEY'S HERCULES, ADAPTED BY KRISTOFFER DIAZ, DIRECTED BY LEAR DEBESSONET AND FEATURING MUSIC BY ALAN MENKEN AND LYRICS BY DAVID ZIPPEL. THIS PRODUCTION FEATURED OVER 200 COMMUNITY PLAYERS AT THE DELACORTE THEATER.

PUBLIC FORUM

Name of the organization

NEW YORK SHAKESPEARE FESTIVAL

Employer identification number

13-1844852

THE PUBLIC FORUM IS A VITAL NEXUS OF CREATIVITY, COMMUNITY, AND IDEAS, DEDICATED TO EMBRACING THE COMPLEXITIES OF CONTEMPORARY SOCIETY. THE PROGRAM OFFERS A SERIES OF CONVERSATIONS AND PERFORMANCES FEATURING LEADING VOICES IN POLITICS, MEDIA, AND THE ARTS, DRAWING THE BROADEST RANGE OF VOICES IN CONVERSATION ABOUT AMERICAN CULTURE. USING THEATER AS A JUMP-OFF POINT TO SHED LIGHT ON CONTEMPORARY ISSUES, PUBLIC FORUM HAS TACKLED A NUMBER OF ISSUES FROM POVERTY AND INEQUALITY TO MUSIC AND AMERICAN IDENTITY. BEGINNING IN JANUARY 2018, PUBLIC FORUM LAUNCHES A NEW SERIES, CIVIC SALONS, OFFERING A MONTHLY BRUNCH-TIME GATHERING DEDICATED TO CREATING AN ONGOING CONVERSATION FORGED IN THE SPIRIT OF COMMUNITY AND CONVERSATION. EACH MONTH WILL FEATURE A DIFFERENT THEME AND A PLATFORM FOR READINGS, MUSICAL PERFORMANCE, AND KEYNOTE ADDRESS-ALL CHOSEN IN THE HOPES OF INSPIRING CIVIC ENGAGEMENT AND SOCIAL CHANGE.

PUBLIC SHAKESPEARE INITIATIVE

UNDER THE LEADERSHIP OF SCHOLAR MICHAEL SEXTON, THE PUBLIC SHAKESPEARE INITIATIVE WILL PRODUCE AND PRESENT A MULTIDIMENSIONAL LINEUP OF PROGRAMS, FUELED BY THE BELIEF THAT SHAKESPEARE IS FOR EVERYONE. THESE INCLUDE: A SERIES OF SCHOLARLY EXPLORATION AND PERFORMANCE THROUGH PUBLIC SHAKESPEARE PRESENTS AND INTIMATE PUBLIC SHAKESPEARE TALKS; ARTIST DEVELOPMENT PROGRAMS THAT ENLIVEN EXPLORATIONS OF SHAKESPEARE WITH THE MOST VISIONARY ARTISTIC MINDS WORKING TODAY; AND THE HUNTS POINT CHILDREN'S SHAKESPEARE ENSEMBLE, A TARGETED COMMUNITY ENGAGEMENT PROGRAM IN PARTNERSHIP WITH THE HUNTS POINT ALLIANCE FOR CHILDREN.

NEW WORK DEVELOPMENT & ANCILLARY PROGRAMS:

Name of the organization NEW YORK SHAKESPEARE FESTIVAL	Employer identification number 13-1844852
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EARLY CAREER WORKING GROUPS

THE PUBLIC'S EARLY CAREER WORKING GROUPS PROVIDE COLLABORATIVE, EFFECTIVE MODELS FOR SUPPORTING ARTISTS AT CRITICAL STAGES OF THEIR DEVELOPMENT. THE PRIMARY GOALS OF EACH PROGRAM ARE TO BUILD MEANINGFUL PATHWAYS FOR ARTISTIC AND PROFESSIONAL ADVANCEMENT:

EMERGING WRITERS GROUP (EWG). FOCUSED ON IDENTIFYING AND SUPPORTING EARLY CAREER PLAYWRIGHTS, THE EMERGING WRITER'S GROUP PROVIDES KEY RESOURCES FOR WRITERS AT EVERY STAGE OF THEIR CAREERS. THE PRIMARY GOAL OF THE EWG PROGRAM IS TO BUILD MEANINGFUL PATHWAYS FOR WRITERS' ARTISTIC AND PROFESSIONAL DEVELOPMENT. THE NEW WORK DEVELOPMENT TEAM WORK TO CREATE A FERTILE COMMUNITY AND FOSTER A WEB OF SUPPORTIVE ARTISTIC RELATIONSHIPS ACROSS GENERATIONS. WRITERS ARE SELECTED BI-ANNUALLY AND RECEIVE A TWO-YEAR FELLOWSHIP, WHICH INCLUDES A \$15,000 STIPEND. ELIGIBILITY CRITERIA ARE TAILORED TO SERVE QUALIFIED WRITERS WHO ARE SHUT OUT OF THE FIELD'S STANDARD PLAY DEVELOPMENT CHANNELS - THOSE WITHOUT PROFESSIONAL REPRESENTATION OR GRADUATE SCHOOL TRAINING. THE PLAYWRIGHTS PARTICIPATE IN A BI-WEEKLY WRITERS GROUP FEATURING MASTER CLASSES LED BY ESTABLISHED PLAYWRIGHTS, AND THEIR FELLOWSHIP CULMINATES IN AN INDUSTRY-INVITED SHOWCASE OF WORK DEVELOPED DURING THE RESIDENCY.

DEvised THEATER WORKING GROUP (DTWG). FORMED IN 2014, THE DEvised THEATER WORKING GROUP (DTWG) IS AN ARTIST RESOURCE GROUP DESIGNED FOR MAKERS OF ALL DISCIPLINES, INCLUDING THOSE WHO DO NOT SELF-IDENTIFY AS THEATER MAKERS BUT FOR WHOM THEATRE IS A POTENT METAPHOR OR FRAMEWORK.

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DTWG SERVES AS A THINK TANK TO ENSURE THAT THE PUBLIC IS RESPONSIVE TO THE MOST IMMEDIATE REALITIES OF INDEPENDENT THEATER MAKING. UNDER THE LEADERSHIP OF THE DIRECTOR OF THE UNDER THE RADAR FESTIVAL, MARK RUSSELL, DTWG OFFERS NEXT-GENERATION THEATER-MAKERS A SUPPORTIVE FRAMEWORK IN WHICH TO DEVELOP THEIR WORK, ENGAGE IN CONSISTENT DIALOGUE, AND BE CHALLENGED BY EACH OTHER'S AESTHETIC PRACTICE. USING THE MODEL OF THE EMERGING WRITERS GROUP, DTWG CREATES AN INFRASTRUCTURE TO SUPPORT COHORTS OF BETWEEN EIGHT AND TEN ARTISTS OR PERFORMANCE GROUPS TO MEET CONSISTENTLY THROUGHOUT THE YEAR AS THEY CREATE THEATER BY OFFERING THE DRAMATURGICAL, TECHNICAL, ARTISTIC AND ADMINISTRATIVE RESOURCES OF THE PUBLIC.

JOE'S PUB WORKING GROUP (JPWG) & NEW YORK VOICES. IN ORDER TO CREATE SUSTAINABLE RESOURCES FOR THE FIELD AND TO SUPPORT EMERGING ARTISTS, ASSOCIATE ARTISTIC DIRECTOR/SENIOR DIRECTOR OF ARTISTIC PROGRAMS, SHANTA THAKE, AND DIRECTOR OF JOE'S PUB, ALEX KNOWLTON, BLENDED THE PUBLIC'S APPROACH TO SUPPORTING EMERGING PLAYWRIGHTS AND INDEPENDENT ARTISTS TO CREATE TWO PROGRAMS:

JOE'S PUB WORKING GROUP, WHICH AIMS TO ENRICH THE SUSTAINABILITY AND GROWTH OF NEW YORK-BASED EMERGING ARTISTS' CAREERS; AND NEW YORK VOICES, A COMMISSIONING INITIATIVE FOR MUSICIANS AND PERFORMANCE ARTISTS TO CREATE CROSS-GENRE THEATER PIECES. JOE'S PUB WORKING GROUP SUPPORTS COHORTS OF FIVE EARLY CAREER MUSICIANS AND PERFORMANCE ARTISTS BY PROVIDING A VARIETY OF SUPPORT. THESE INCLUDE ADMINISTRATIVE RESOURCES, PHYSICAL SPACE, AND CURATORIAL SERVICES - FURTHER CULTIVATING A COMMUNITY ATMOSPHERE WHEREIN THOSE ARTISTS CAN CREATE AND SUSTAIN NEW AND DEVELOPING WORK. THE PROGRAM SELECTS FROM THE FIELD'S

Name of the organization

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MOST EXCITING ARTISTS-IDENTIFYING MUSICIANS AND PERFORMANCE ARTISTS THAT PARTICULARLY EXHIBIT A STRONG NARRATIVE VOICE IN THEIR WORK-AND ASKS THEM TO EXPLORE THEATRICAL STORYTELLING AND SONGWRITING.

NEW YORK VOICES STARTED FROM A DESIRE TO DIRECTLY ADDRESS THE CRUMBLING MUSIC INDUSTRY AND THE LACK OF ALBUM SALES, AS WELL AS TO FIND A NEW WAY TO SUPPORT ARTISTS IN A MANNER UNIQUE TO JOE'S PUB. SINCE ALBUM SALES ARE A RELIC, WE HAVE COMMITTED TO COMMISSIONING AT LEAST THREE MUSICIANS PER YEAR AND HELPING THEM TO DEVELOP NEW TOOLS FOR THEIR LIVE SHOW. THE HOPE FOR THESE SHOWS IS THAT THEY WILL LEAD TO LONGER RUNS IN VARIOUS MARKETS AROUND THE COUNTRY AND ALLOW THESE MUSICIANS TO ACCESS A NEW REALM OF GRANTS AND FUNDING. NEW YORK VOICES ANNUALLY COMMISSIONS A SMALL GROUP OF ARTISTS OVER THE COURSE OF THE YEAR, PRODUCED AS A CULMINATING PERFORMANCE SERIES. IN ADDITION, THE PROGRAM PROVIDES FINISHING FUNDS AS NECESSARY TO ASSIST THE ARTIST IN FULLY REALIZING EACH PROJECT AND INCREASE THEIR VIABILITY FOR A TOURING LIFE. WITH THESE DYNAMIC INITIATIVES, JOE'S PUB HAS BEEN ABLE TO GROW FROM BEING STRICTLY A PRESENTING VENUE INTO A ROBUST PRODUCING EFFORT, WORKING WITH A DIVERSE SLATE OF MULTIDISCIPLINARY ARTISTS. EXPENSES \$ 10,737,004. INCLUDING GRANTS OF \$ 923,135. REVENUE \$ 730,976

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

THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE CONSISTING OF THE CHAIR, OTHER OFFICERS OF THE BOARD, THE CHAIRS OF THE AUDIT, FINANCE AND NOMINATING COMMITTEES AND SUCH ADDITIONAL TRUSTEES AS MAY BE ELECTED BY THE BOARD. THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL THE POWERS OF THE BOARD PERMITTED BY LAW WHEN THE BOARD IS NOT IN SESSION, EXCEPT FOR CERTAIN SPECIFIC MATTERS PURSUANT TO THE ORGANIZATION'S BY-LAWS.

Name of the organization

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

MANAGEMENT (INCLUDING BUT NOT LIMITED TO THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER) REVIEWS THE FORM 990 WITH THE AUDIT COMMITTEE. AFTER THAT EVALUATION, THE DRAFT 990 IS CIRCULATED TO THE EXECUTIVE COMMITTEE FOR REVIEW AND APPROVAL. THE PUBLIC VERSION OF THE 990 IS THEN CIRCULATED TO THE FULL BOARD FOR COMMENTS AND QUESTIONS PRIOR TO FILING.

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

THROUGHOUT THE FISCAL YEAR, BOARD MEMBERS ARE REMINDED TO DISCLOSE ANY CONFLICTS THEY MAY HAVE TO MANAGEMENT OR THE AUDIT COMMITTEE. AT THE END OF EACH FISCAL YEAR, CONFLICT OF INTEREST FORMS ARE FILLED OUT BY TRUSTEES, AND THE AUDIT COMMITTEE OR ITS CHAIR EVALUATES THE DISCLOSURES TO DETERMINE WHETHER THEY INVOLVE MATERIAL CONFLICTS AND MAKES A RECOMMENDATION. INTERESTED BOARD MEMBERS RECUSE THEMSELVES FROM DISCUSSION AND VOTING RELATING TO ANY CONFLICTED MATTER. HOWEVER, AS A MEMBER OF THE BOARD OR COMMITTEE, THE INTERESTED BOARD MEMBER MAY BE COUNTED IN DETERMINING THE ESTABLISHMENT OF THE QUORUM AT SUCH A MEETING.

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

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

THE ARTISTIC DIRECTOR'S CONTRACT WAS RENEWED EFFECTIVE JUNE 2018 AND RUNS THROUGH JULY 2028. THE EXECUTIVE DIRECTOR'S CONTRACT WAS RENEWED IN JANUARY 2018 AND RUNS THROUGH DECEMBER 2021. THE EXECUTIVE COMMITTEE RECEIVED A REPORT FROM AN INDEPENDENT CONSULTANT WITH COMPARATIVE DATA FROM PEER CULTURAL INSTITUTIONS IN BUDGET AND PROGRAM SIZE IN NEW YORK CITY AND

Name of the organization NEW YORK SHAKESPEARE FESTIVAL	Employer identification number 13-1844852
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ACROSS THE COUNTRY. USING THIS DATA, THE COMMITTEE DETERMINED A COMPARABLE COMPENSATION LEVEL.

FOR THE KEY POSITIONS OF PRODUCTION EXECUTIVE, CHIEF ADVANCEMENT OFFICER, CHIEF FINANCIAL OFFICER, MANAGING DIRECTOR AND SENIOR DIRECTOR OF MARKETING, THE SENIOR DIRECTOR OF HUMAN RESOURCES AND/OR INDEPENDENT CONSULTANT GARNERS INFORMATION USING COMPARATIVE DATA FROM SIMILARLY-SIZED, NONPROFIT ARTS INSTITUTIONS. THE INFORMATION IS CULLED FROM FORM 990S AND FROM INDUSTRY SURVEYS. USING THIS DATA, THE EXECUTIVE DIRECTOR AND HR DETERMINE COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

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

PENSION-RELATED CHANGES OTHER THAN PERIODIC PENSION COST	-915,062.
FORGIVENESS OF ACCRUED AND UNPAID INTEREST FROM PUBLIC THEATER PRODUCTIONS	-59,908.
TOTAL TO FORM 990, PART XI, LINE 9	-974,970.

Related Organizations and Unrelated Partnerships

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

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

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

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

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

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
PUBLIC THEATER PRODUCTIONS - 26-3803813 425 LAFAYETTE STREET NEW YORK, NY 10003	COMMERCIAL THEATER CO-PRODUCTIONS	NY	N/A	C CORP	68,582.	52,731.	100%	X	

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

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

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) THE SHAKESPEARE SOCIETY OF AMERICA, INC.	B	550,135.	AMOUNT OF GRANT TO THE SOCIETY
(2) THE SHAKESPEARE SOCIETY OF AMERICA, INC.	Q	558,730.	REIMBURSEMENT FROM THE SOCIETY
(3) PUBLIC THEATER PRODUCTIONS	B	452,329.	CONTRIBUTION OF DEBT TO CAPITAL
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

THE SHAKESPEARE SOCIETY OF AMERICA, INC.

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

SCHEDULE R PARTS II AND V

THE SHAKESPEARE SOCIETY HAS AN AFFILIATION AGREEMENT WITH NEW YORK SHAKESPEARE FESTIVAL SUCH THAT THE TWO ORGANIZATIONS SHARE STAFF AND SPACE. NEW YORK SHAKESPEARE FESTIVAL PROCESSES ALL PAYMENTS AND PAYROLL AND SHAKESPEARE SOCIETY REIMBURSES NEW YORK SHAKESPEARE FESTIVAL FOR ALL EXPENSES RELATED TO THE SOCIETY'S OPERATIONS. AS SOLE MEMBER OF THE SHAKESPEARE SOCIETY, NEW YORK SHAKESPEARE FESTIVAL MAKES AN ANNUAL GRANT TO THE SHAKESPEARE SOCIETY TO SUPPORT THEIR CONTINUING OPERATIONS.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	FURNITURE AND EQUIPMENT	VARIOUS	SL	5.00		16	1,024,494.				1,024,494.	731,621.		57,776.	789,397.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						1,024,494.				1,024,494.	731,621.		57,776.	789,397.
	OTHER														
2	COMPUTER SOFTWARE AND HARDWARE	VARIOUS	SL	5.00		16	1,344,695.				1,344,695.	1,001,446.		119,980.	1,121,426.
3	LEASEHOLD IMPROVEMENTS	VARIOUS	SL	5.00		16	21298713.				21298713.	5,332,456.		1,115,180.	6,447,636.
5	WEBSITE	VARIOUS	SL	3.00		16	28,325.				28,325.	28,325.		0.	28,325.
	* 990 PAGE 10 TOTAL OTHER						22671733.				22671733.	5,362,227.		1,235,160.	7,597,387.
	* GRAND TOTAL 990 PAGE 10 DEPR						23696227.				23696227.	7,093,848.		1,292,936.	8,386,784.