

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2011
Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 09-01-2011 and ending 08-31-2012

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE ELAINE KAUFMAN CULTURAL CENTER LUCY MOSES SCHOOL FOR MUSIC AND DANCE Doing Business As KAUFMAN MUSIC CENTER Number and street (or P O box if mail is not delivered to street address) Room/suite 129 WEST 67TH STREET City or town, state or country, and ZIP + 4 NEW YORK, NY 10023 F Name and address of principal officer LYDIA KONTOS 129 WEST 67TH STREET NEW YORK, NY 10023	D Employer identification number 13-1991118 E Telephone number (212) 501-3303 G Gross receipts \$ 9,166,544 H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number
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		
J Website: WWW KAUFMANMUSICCENTER ORG		
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 1962 M State of legal domicile NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO PROVIDE MUSIC EDUCATION AND PERFORMANCE PROGRAMS FOR CHILDREN AND ADULTS OF ALL AGES & ABILITIES <hr/> 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 22 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 21 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 269 6 Total number of volunteers (estimate if necessary) 6 63 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 7b Net unrelated business taxable income from Form 990-T, line 34 7b 0		
Revenue		Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)		3,097,589	2,116,905
9 Program service revenue (Part VIII, line 2g)		3,966,656	4,215,128
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		671,061	260,121
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-308,740	-238,928
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,426,566	6,353,226
Expenses			
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		246,115	312,267
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)		4,300,583	4,602,536
16a Professional fundraising fees (Part IX, column (A), line 11e)		34,824	0
b Total fundraising expenses (Part IX, column (D), line 25) 733,137			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		2,350,275	2,932,667
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		6,931,797	7,847,470
19 Revenue less expenses Subtract line 18 from line 12		494,769	-1,494,244
Net Assets or Fund Balances		Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)		29,137,273	27,943,524
21 Total liabilities (Part X, line 26)		1,050,906	1,139,385
22 Net assets or fund balances Subtract line 21 from line 20		28,086,367	26,804,139

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	2013-06-17 Date	
	LYDIA KONTOS EXECUTIVE DIRECTOR Type or print name and title		
Paid Preparer's Use Only	Preparer's signature FREDERICK H ROTHMAN Firm's name (or yours if self-employed), address, and ZIP + 4 LOEB & TROPER LLP 655 THIRD AVENUE 12TH FLOOR NEW YORK, NY 10017	Date Check if self-employed <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions) P01275277 EIN 13-1517563 Phone no (212) 867-4000

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 to any question in this Part III

1 Briefly describe the organization's mission

THE MISSION OF KAUFMAN MUSIC CENTER IS TO AWAKEN AND ENHANCE APPRECIATION OF AND PARTICIPATION IN MUSIC AND THE OTHER ARTS UNDERLYING THIS MISSION IS THE BELIEF THAT THE ARTS ARE ESSENTIAL TO THE HUMAN EXPERIENCE AND A VITAL COMPONENT OF EDUCATION FOR EVERYONE FOUNDED IN 1962 AS A COMMUNITY SCHOOL FOR MUSIC AND DANCE, TODAY'S KAUFMAN MUSIC CENTER PROVIDES MUSIC EDUCATION AND PERFORMANCE PROGRAMS FOR MORE THAN 75,000 NEW YORKERS OF ALL AGES AND ABILITY LEVELS EACH YEAR THROUGH THE LUCY MOSES SCHOOL, SPECIAL MUSIC SCHOOL, MERKIN CONCERT HALL AND A VIBRANT MUSICAL THEATER PROGRAM THE CENTER PLAYS HOST TO WORLD-RENOWNED TALENT AS WELL AS BEGINNING LEARNERS

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 3,533,074 including grants of \$ 211,590) (Revenue \$ 2,910,699)

LUCY MOSES SCHOOL, NEW YORK'S LARGEST COMMUNITY SCHOOL OF THE ARTS, SERVES ALL AGES, BACKGROUNDS AND SKILL LEVELS -- FROM ACCOMPLISHED MUSICIANS TO ASPIRING BEGINNERS EACH YEAR 2,500 STUDENTS COME TO LUCY MOSES SCHOOL FOR LESSONS AND CLASSES IN MUSIC, DANCE AND THEATER, AS WELL AS INSPIRATIONAL PERFORMANCES BY PEERS AND MASTER CLASSES BY RENOWNED MUSICIANS SUCH AS ROBERT MARTIN, CELLO, PHILLIP QUINT, VIOLIN, YULIYA GORENMAN, PIANO, MATTI RAEKALLIE, PIANO, AND BORIS SLUTSKY, PIANO STUDENTS PAY TUITION, WHICH COVERS ABOUT 60% OF THE COST OF THEIR STUDIES, MANY STUDENTS ARE OFFERED FINANCIAL AID THE CENTER'S THEATER WING IS A CREATIVE HUB OF CLASSES, SCHOOL VACATION PROGRAMS, AND PRESENTATIONS THAT FOCUS ON MUSICAL THEATER WORKS EXAMINING THE MASTERPIECES OF THE GENRE, AND CREATING AND PRESENTING NEW WORKS FOR YOUNG AND ADULT AUDIENCES THE CENTER'S OUTREACH PROGRAMS GIVE STUDENTS IN OTHER AREAS OF THE CITY (LONG ISLAND CITY, HARLEM) ACCESS TO THE CENTER'S FINEST EDUCATIONAL OPPORTUNITIES CLOSER TO HOME, WHILE GIVING THE OPPORTUNITY FOR AND ENCOURAGING PARTICIPATION IN THE CENTER'S COMMUNITY ON WEST 67TH STREET

4b (Code) (Expenses \$ 1,617,063 including grants of \$) (Revenue \$ 1,070,466)

MERKIN CONCERT HALL IS RENOWNED FOR ITS INNOVATIVE AND DIVERSE PROGRAMMING- FROM EXPERIMENTAL WORKS BY UP-AND-COMING COMPOSERS TO CLASSICAL CONCERTS TO BROADWAY CLASSICS AND FAMILY MUSICALS THE KAUFMAN MUSIC CENTER'S ECSTATIC MUSIC FESTIVAL, WHICH HAS BROUGHT TOGETHER MUSICAL GENRES IN UNEXPECTED COLLABORATIONS, CREATED EXCITEMENT AND ENGAGEMENT IN A NEW KIND OF CONCERT EXPERIENCE PRESENTATIONS ALSO INCLUDED TUESDAY MATINEE RECITALS AND BROADWAY CLOSE UP, WHICH PRESENTS AN INSIDERS VIEW OF THE WORLD OF MUSICAL THEATER AND TWO SERIES OF FAMILY CONCERTS BROADWAY PLAYHOUSE AND POPPY SEED PLAYERS SOME OF THE FEATURED PERFORMERS FOR THE 11-12 SEASON INCLUDED JUDY KUHN, DAN DEACON, LIZ CALLAWAY, BARBARA WALSH, STEPHEN BOGARDUS, KAREN ZIEMBA, DAVID BYRNE, RICHARD REED PARRY AND THE MOUNTAIN GOATS

4c (Code) (Expenses \$ 1,088,709 including grants of \$ 100,677) (Revenue \$ 233,963)

THE SPECIAL MUSIC SCHOOL IS THE ONLY K-8 PUBLIC SCHOOL IN NEW YORK FOR MUSICALLY-GIFTED CHILDREN WHICH PROVIDES A COMPLETE MUSIC CURRICULUM, INCLUDING TWO PRIVATE LESSONS PER WEEK, DURING THE REGULAR SCHOOL DAY KAUFMAN MUSIC CENTER PROVIDES THE FUNDING FOR THE ENTIRE MUSIC PROGRAM, WHICH INCLUDES THE LESSONS, AND CLASSES IN THEORY, MUSIC HISTORY, AND CHORUS FUNDING FOR THE MUSIC PROGRAM COMES ENTIRELY FROM CONTRIBUTIONS TO KAUFMAN MUSIC CENTER SINCE, AS A PUBLIC SCHOOL, THE SPECIAL MUSIC SCHOOL DOES NOT COLLECT TUITION STUDENTS WHO HAVE COMPLETED THE EIGHTH GRADE OF THE SPECIAL MUSIC SCHOOL, AS WELL AS APPLICANTS FROM THE LUCY MOSES SCHOOL AND THE REST OF THE COMMUNITY WHO DEMONSTRATE EXTRAORDINARY TALENT AND ACCOMPLISHMENT IN MUSIC, AND WHO HAVE EXPRESSED A DESIRE TO EXPLORE THE PATH TO A CAREER IN MUSIC MAY APPLY TO THE YOUNG ARTISTS PROGRAM, AN AFTER-SCHOOL AND WEEKEND PROGRAM WHICH INCLUDES STUDY ON AN INSTRUMENT, PLUS THEORY, ENSEMBLE AND A ROBUST PERFORMING SCHEDULE ONE OF THE MOST ACTIVE STUDENT PERFORMANCE GROUPS IS KAUFMAN MUSIC CENTER'S HIGHLY RENOWNED "FACE THE MUSIC" ENSEMBLE" WHICH FOCUSES ON THE PERFORMANCE OF WORKS BY LIVING COMPOSERS, PERFORMED BY TEENAGERS

(Code) (Expenses \$ 91,035 including grants of \$) (Revenue \$)

SPECIAL PROJECTS AT KAUFMAN MUSIC CENTER ARE GENERALLY SHORT TERM INITIATIVES THAT ARE FUNDED SEPARATELY TO PROMOTE THE CENTER'S MISSION PROJECTS IN 2012 INCLUDED A MUSIC/DRAMA RESIDENCY AT MANHATTAN SCHOOL FOR CHILDREN, TWO ARTISTS IN RESIDENCE FOR THE THEATER WING'S 'PLANTING NEW SEEDS' PROGRAM, AND AN INTERNSHIP PROGRAM

(Code) (Expenses \$ 36,512 including grants of \$) (Revenue \$)

THE BIRNBAUM MUSIC LIBRARY SERVES THE DIVERSE POPULATIONS OF KAUFMAN MUSIC CENTER WITH ITS COMPREHENSIVE COLLECTION OF ISRAELI MUSIC AND TAPES, THE LIBRARY IS AVAILABLE TO COMPOSERS AND PERFORMERS ALIKE FACULTY AND STUDENTS OF BOTH KAUFMAN MUSIC CENTER SCHOOLS CAN FIND REPERTOIRE THEY NEED TO TEACH OR PERFORM

4d Other program services (Describe in Schedule O)

(Expenses \$ 127,547 including grants of \$) (Revenue \$)

4e Total program service expenses \$ 6,366,393

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I <input checked="" type="checkbox"/>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III <input checked="" type="checkbox"/>		No
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V <input checked="" type="checkbox"/>	Yes	
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. <input checked="" type="checkbox"/>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. <input checked="" type="checkbox"/>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. <input checked="" type="checkbox"/>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. <input checked="" type="checkbox"/>	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. <input checked="" type="checkbox"/>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII <input checked="" type="checkbox"/>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional <input checked="" type="checkbox"/>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E <input checked="" type="checkbox"/>	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Part III and IV		No
17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I <input checked="" type="checkbox"/>	Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II <input checked="" type="checkbox"/>	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III <input checked="" type="checkbox"/>		No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question number, question text, and Yes/No response. Includes questions 1a through 14b regarding Form 1096, W-2G forms, employee reporting, foreign accounts, and charitable trusts.

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

Check if Schedule O contains a response to any question 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		
	1a 22		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 21		
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <input checked="" type="checkbox"/> SUSAN COHEN 129 WEST 67TH STREET NEW YORK, NY 10023 (212) 501-3303

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

Check if Schedule O contains a response to any question 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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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) MS ROSALIND DEVON CHAIRMAN	10 00	X		X				0	0	0
(2) MRS ELAINE KAUFMAN HONORARY CHAIRMAN	2 00	X		X				0	0	0
(3) MS ANDREA BROWN PRESIDENT	10 00	X		X				0	0	0
(4) MS BETHANY MILLARD VICE PRESIDENT	5 00	X		X				0	0	0
(5) MR CHARLES DIMSTON VICE PRESIDENT	2 00	X		X				0	0	0
(6) MRS PHYLLIS FEDER VICE PRESIDENT	5 00	X		X				0	0	0
(7) MR IRVING SITNICK VICE PRESIDENT	2 00	X		X				0	0	0
(8) MS CHRISTINA M MASON TREASURER	2 00	X		X				0	0	0
(9) MS CATHY WHITE O'ROURKE SECRETARY	5 00	X		X				0	0	0
(10) MS LYDIA KONTOS EXEC DIRECTOR	50 00	X		X			354,042	0	14,089	
(11) MR LEONARD GOODMAN HONORARY CHAIRMAN	2 00	X		X				0	0	0
(12) MR GREGORY FIERCE TRUSTEE	2 00	X						0	0	0
(13) MR ALEXANDER P LAMIS TRUSTEE	2 00	X						0	0	0
(14) MS PATRICIA WEINBACH TRUSTEE	2 00	X						0	0	0
(15) MR DAVID B KRIEGER TRUSTEE	2 00	X						0	0	0
(16) MR SOLOMON MERKIN TRUSTEE	2 00	X						0	0	0
(17) MRS WENDY MOSLER TRUSTEE	2 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 (describe hours for related organizations in Schedule O)	(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) MS GABRIELLE LONDON PALITZ TRUSTEE	2 00	X						0	0	0
(19) MS JUDITH ROM TRUSTEE	2 00	X						0	0	0
(20) MS KAREN SHERRY TRUSTEE	2 00	X						0	0	0
(21) MS KARA UNTERBERG TRUSTEE	2 00	X						0	0	0
(22) MS JOY WYATT TRUSTEE	2 00	X						0	0	0
(23) DR TZIPORA JOCHSBERGER FORMER FOUNDING DIRECTOR	50						X	36,986	0	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								391,028	0	14,089

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 **1**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
HOLLAND AND KNIGHT PO BOX 864084 ORLANDO, FL 328864084	LEGAL SERVICES	462,899

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 **1**

Part VIII Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	522,448				
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	251,264				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	1,343,193				
	g	Noncash contributions included in lines 1a-1f \$ <u>25,389</u>					
	h	Total. Add lines 1a-1f		2,116,905			
Program Service Revenue	2a	TUITION	611600	2,910,699	2,910,699		
	b	PRESENTATION/FACILITY	711130	1,070,466	1,070,466		
	c	SPECIAL MUSIC SCHOOL	611600	233,963	233,963		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		4,215,128			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		227,918		227,918	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a		(i) Real				
			Gross rents	637,900			
		b	Less rental expenses	807,258			
		c	Rental income or (loss)	-169,358			
	d	Net rental income or (loss)		-169,358		-169,358	
	7a		(i) Securities				
			Gross amount from sales of assets other than inventory	1,904,258			
		b	Less cost or other basis and sales expenses	1,872,055			
		c	Gain or (loss)	32,203			
	d	Net gain or (loss)		32,203		32,203	
	8a		Gross income from fundraising events (not including \$ <u>522,448</u> of contributions reported on line 1c) See Part IV, line 18				
a			64,435				
b		Less direct expenses b	134,005				
c	Net income or (loss) from fundraising events		-69,570		-69,570		
9a		Gross income from gaming activities See Part IV, line 19					
	a						
	b	Less direct expenses b					
c	Net income or (loss) from gaming activities						
10a		Gross sales of inventory, less returns and allowances					
	a						
	b	Less cost of goods sold b					
c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions		6,353,226	4,215,128	0	21,193	

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) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question 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 governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	312,267	312,267		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	369,008	210,290	44,013	114,705
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	39,986		39,986	
7	Other salaries and wages	3,544,974	3,290,847	978	253,149
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	105,820	94,540	1,544	9,736
9	Other employee benefits	230,087	192,490	6,119	31,478
10	Payroll taxes	312,661	278,768	4,639	29,254
11	Fees for services (non-employees)				
a	Management				
b	Legal	495,961		495,961	
c	Accounting	27,696		27,696	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	39,959		39,959	
g	Other	742,075	621,437	20,262	100,376
12	Advertising and promotion	272,824	219,808	4,180	48,836
13	Office expenses	408,406	336,515	14,264	57,627
14	Information technology				
15	Royalties				
16	Occupancy	268,005	234,684	13,436	19,885
17	Travel				
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	635,327	556,336	31,851	47,140
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	CULTIVATION EXPENSE	32,956	8,953	3,052	20,951
b	CONCESSION EXPENSE	7,354	7,354		
c	SUNDRY	2,104	2,104		
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,847,470	6,366,393	747,940	733,137
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	375	1	375
	2 Savings and temporary cash investments	4,834,679	2	4,028,968
	3 Pledges and grants receivable, net	403,194	3	229,000
	4 Accounts receivable, net	5,504	4	4,411
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	50,000
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	125,655	9	136,204
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	24,753,423		
	b Less accumulated depreciation	8,769,746	10c	15,983,677
	11 Investments—publicly traded securities	6,880,340	11	7,468,033
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	79,113	15	42,856
16 Total assets. Add lines 1 through 15 (must equal line 34)	29,137,273	16	27,943,524	
Liabilities	17 Accounts payable and accrued expenses	271,633	17	260,523
	18 Grants payable		18	
	19 Deferred revenue	657,004	19	765,945
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	122,269	25	112,917
	26 Total liabilities. Add lines 17 through 25	1,050,906	26	1,139,385
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	19,433,716	27	18,369,952
	28 Temporarily restricted net assets	2,561,701	28	2,318,237
	29 Permanently restricted net assets	6,090,950	29	6,115,950
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	28,086,367	33	26,804,139	
34 Total liabilities and net assets/fund balances	29,137,273	34	27,943,524	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,353,226
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,847,470
3	Revenue less expenses Subtract line 2 from line 1	3	-1,494,244
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,086,367
5	Other changes in net assets or fund balances (explain in Schedule O)	5	212,016
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	26,804,139

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question 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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
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?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A

(Form 990 or 990EZ)

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.

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

Name of the organization
THE ELAINE KAUFMAN CULTURAL CENTER
LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number

13-1991118

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 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 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 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)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 - (ii) a family member of a person described in (i) above?
 - (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
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						
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)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2010 Schedule A, Part II, line 14 **15**

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)						

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

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2011. 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—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2011

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization THE ELAINE KAUFMAN CULTURAL CENTER LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number 13-1991118

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

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

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

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

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	6,065,950	6,065,950	6,065,950	5,552,950	
b Contributions	25,000				
c Investment earnings or losses	91,171	657,150	223,648	513,000	
d Grants or scholarships	91,171	657,150	223,648		
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	6,090,950	6,065,950	6,065,950	6,065,950	

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment
- b** Permanent endowment 100.000 %
- c** Term endowment

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	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment. 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		993,154		993,154
b Buildings	10,187,829	11,405,062	7,596,513	13,996,378
c Leasehold improvements				
d Equipment		2,167,378	1,173,233	994,145
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				15,983,677

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,353,226
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,847,470
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,494,244
4	Net unrealized gains (losses) on investments	4	212,016
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	212,016
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,282,228

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

1	Total revenue, gains, and other support per audited financial statements	1	7,020,274
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	212,016
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	807,258
e	Add lines 2a through 2d	2e	1,019,274
3	Subtract line 2e from line 1	3	6,001,000
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 XIV)	4b	352,226
c	Add lines 4a and 4b	4c	352,226
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	6,353,226

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	8,302,502
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 XIV)	2d	807,258
e	Add lines 2a through 2d	2e	807,258
3	Subtract line 2e from line 1	3	7,495,244
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	39,959
b	Other (Describe in Part XIV)	4b	312,267
c	Add lines 4a and 4b	4c	352,226
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	7,847,470

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ENDOWMENT FUNDS ARE RESTRICTED TO INVESTMENT IN PERPETUITY, THE INCOME FROM WHICH IS EXPENDABLE TO SUPPORT VARIOUS PROGRAMS AND THE OPERATIONS OF THE ENTITY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE CENTER HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS PERIODS ENDING AUGUST 31, 2009 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE-BUILDING 179,864 RENTAL EXPENSE-DEPRECIATION 426,382 RENTAL EXPENSE- SALARY & FRINGE 201,012
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIP AWARDS 312,267 INVESTMENT ADVISORY FEES 39,959
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE-BUILDING 179,864 RENTAL EXPENSE-DEPRECIATION 426,382 RENTAL EXPENSE- SALARY & FRINGE 201,012
PART XIII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIP AWARDS 312,267

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2011

Open to Public Inspection

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
▶ **Attach to Form 990 or Form 990-EZ.**

Department of the Treasury
Internal Revenue Service

Name of the organization
THE ELAINE KAUFMAN CULTURAL CENTER
LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number
13-1991118

Part I

- 1** Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2** Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3** Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II.

	YES	NO
1	Yes	
2	Yes	
3	Yes	

- 4** Does the organization maintain the following?
 - a** Records indicating the racial composition of the student body, faculty, and administrative staff?
 - b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
 - c** Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
 - d** Copies of all material used by the organization or on its behalf to solicit contributions?
If you answered "No" to any of the above, please explain. If you need more space, use Part II.

4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	

- 5** Does the organization discriminate by race in any way with respect to
 - a** Students' rights or privileges?
 - b** Admissions policies?
 - c** Employment of faculty or administrative staff?
 - d** Scholarships or other financial assistance?
 - e** Educational policies?
 - f** Use of facilities?
 - g** Athletic programs?
 - h** Other extracurricular activities?
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No

- 6a** Does the organization receive any financial aid or assistance from a governmental agency?
- b** Has the organization's right to such aid ever been revoked or suspended?
If you answered "Yes" to either line 6a or line 6b, explain on Part II.

6a	Yes	
6b		No

- 7** Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II.

7	Yes	
----------	-----	--

Part III Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE KAUFMAN MUSIC CENTER DOES NOT DISCRIMINATE ON THE BASIS OF SEX, RACE, RELIGION, COLOR, NATIONAL ORIGIN OR ANCESTRY, CITIZENSHIP STATUS, PREGNANCY, MARITAL STATUS, NON-JOB RELATED PHYSICAL HANDICAPS, AGE OR SEXUAL ORIENTATION IN EMPLOYMENT OR ADMINISTRATION OF ITS EDUCATIONAL POLICIES, ADMISSION POLICIES, SCHOLARSHIP PROGRAMS OR OTHER SCHOOL-ADMINISTERED PROGRAMS OR ACTIVITIES. THE CENTER IS AN EQUAL OPPORTUNITY EMPLOYER. THE CENTER PUBLISHES THIS STATEMENT IN THE NEW YORK POST, THEIR SCHOOL BROCHURES AND ON THE SCHOOL WEB SITE.
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	RECEIVED DONATION FOR PROPAGATION OF CULTURAL ARTS

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization THE ELAINE KAUFMAN CULTURAL CENTER LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number

13-1991118

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

Table with 6 columns: (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. Includes entry for KAREN HERSHEY and a Total row.

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

NY

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		GALA (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	586,883			586,883
	2 Less Charitable contributions	522,448			522,448
	3 Gross income (line 1 minus line 2)	64,435			64,435
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	134,005			134,005
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(134,005)
11 Net income summary Combine lines 3 and 10 in column (d) ▶				-69,570	

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash 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 Combine lines 1 and 7 in column (d) ▶					

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a
b An outside facility	13b

14 Provide 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

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

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

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

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
	SCHEDULE G, PART 1, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	(I) NAME OF FUNDRAISER KAREN HERSHEY (I) ADDRESS OF FUNDRAISER 356 BROADWAY NO 3B, NEW YORK, NY 10013

Schedule I (Form 990)

OMB No 1545-0047

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
THE ELAINE KAUFMAN CULTURAL CENTER
LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number
13-1991118

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) 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 non-cash assistance
(1) SCHOLARSHIPS	236	312,267			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
		SCHEDULE I, PART I, LINE 2 THE ORGANIZATION AWARDS GRANTS BASED ON FINANCIAL NEED THE GRANTS ARE ENTIRELY NON CASH REDUCTIONS IN TUITION, THEIR USE IS CONTROLLED BY THE SCHOOL AND RECORDED VIA THE ACCOUNTS RECEIVABLE SYSTEM FACULTY AND STAFF ARE RESPONSIBLE FOR MONITORING STUDENTS ATTENDANCE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

THE ELAINE KAUFMAN CULTURAL CENTER
LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number

13-1991118

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|---|--|
| <input 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 type="checkbox"/> Tax idemnification 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 (e.g., maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| <input checked="" 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 in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

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

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

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

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

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

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

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

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

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

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name		(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 reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MS LYDIA KONTOS	(i)	211,431	0	142,611	0	14,089	368,131	0
	(ii)	0	0	0	0	0	0	0
(2) DR TZIPORA JOCHSBERGER	(i)	36,986	0	0	0	0	36,986	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
SUPPLEMENTAL INFORMATION	PART III	IN 2010 THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES RETAINED THE SERVICES OF A COMPENSATION CONSULTANT FOR THE PURPOSES OF REVIEWING THE COMPENSATION OF THE EXECUTIVE DIRECTOR. THE RESULTING REPORT INDICATED A SUBSTANTIAL UNDERPAYMENT IN THE TEN YEAR PERIOD STUDIED. THE AMOUNT IN PART II, LINE 1, COLUMN III REPRESENTS AN AMOUNT DESIGNATED AS DEFERRED COMPENSATION CONTRIBUTIONS IN CONSIDERATION FOR SERVICES PERFORMED IN PRIOR YEARS IN WHICH COMPENSATION WAS LESS THAN COMPETITIVE.

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization THE ELAINE KAUFMAN CULTURAL CENTER LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number 13-1991118

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions or items contributed, (c) Contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining contribution amounts. Rows include Art, Books, Cars, Securities, etc.

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

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years... 31 Does the organization have a gift acceptance policy... 32a Does the organization hire or use third parties... 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked...

Table with 3 columns: Question, Yes, No. Contains rows for 30a, 31, 32a, 33.

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	SCHEDULE M, PART I, COLUMN (B) FOR DONATED SECURITIES AND MUSICAL INSTRUMENTS THE CENTER IS REPORTING THE NUMBER OF CONTRIBUTORS

Schedule M (Form 990) 2011

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 to provide any additional information.
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE ELAINE KAUFMAN CULTURAL CENTER
LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Employer identification number

13-1991118

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	REVIEW WILL BE AT THE BOARD MEETING SUBSEQUENT TO THE PREPARATION OF THIS DOCUMENT BUT BEFORE FILING THE TAX RETURN
	FORM 990, PART VI, SECTION B, LINE 12C	THE ELAINE KAUFMAN CULTURAL CENTER (THE "CENTER") SHALL NOT ENTER INTO TRANSACTIONS WHERE THERE IS A CONFLICT OF INTEREST OR POTENTIAL CONFLICT OF INTEREST UNLESS THERE IS A COMPELLING REASON TO DO SO IF A TRUSTEE OR A FAMILY MEMBER HAS A CONFLICT OF INTEREST IN A PROPOSED TRANSACTION WITH THE CENTER, HE OR SHE MUST MAKE FULL DISCLOSURE BEFORE ANY ACTION ON THE CONTRACT OR TRANSACTION SUCH DISCLOSURE SHALL BE DOCUMENTED ANY TRUSTEE WHO IS AWARE OF A POTENTIAL PERSONAL CONFLICT OF INTEREST WITH RESPECT TO ANY MATTER COMING BEFORE THE BOARD OF TRUSTEES OR ANY COMMITTEE OF THE BOARD MAY BE PRESENT FOR ANY DISCUSSION, BUT SHALL BE EXCUSED FROM ANY VOTING THAT MAY TAKE PLACE IN CONNECTION WITH THE MATTER
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEES INCLUDES A COMPENSATION COMMITTEE CHARGED WITH REVIEWING THE COMPENSATION OF THE EXECUTIVE DIRECTOR A STUDY OF CURRENT AND PAST COMPENSATION WAS UNDERTAKEN BY AN INDEPENDENT BENEFITS CONSULTANT IN SPRING 2010, UTILIZING COMPARABILITY DATA THE STUDY WAS REVIEWED BY THE COMPENSATION COMMITTEE AND WAS LATER APPROVED BY THE EXECUTIVE COMMITTEE
	FORM 990, PART VI, SECTION C, LINE 19	THE ELAINE KAUFMAN CULTURAL CENTER MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
	FORM 990, PART VII, SECTION A	FORM 990, PART X, LINE 25 FORM 990, SCHEDULE D, PART X, LINE 2 THE CENTER PAYS AN ANNUAL RETIREMENT BENEFIT OF \$36,986 TO THE FOUNDING DIRECTOR THE PAYMENTS ARE TO CONTINUE FOR THE REMAINDER OF HER LIFE THE LIABILITY REPRESENTS THE NET PRESENT VALUE OF THE EXPECTED PAYMENTS, ASSUMING A DISCOUNT RATE OF 5%
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 212,016
	FORM 990, PART XII, LINE 2C	THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS

Additional Data

Software ID:
Software Version:
EIN: 13-1991118
Name: THE ELAINE KAUFMAN CULTURAL CENTER
LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 91,035 including grants of \$) (Revenue \$)

SPECIAL PROJECTS AT KAUFMAN MUSIC CENTER ARE GENERALLY SHORT TERM INITIATIVES THAT ARE FUNDED SEPARATELY TO PROMOTE THE CENTER'S MISSION. PROJECTS IN 2012 INCLUDED A MUSIC/DRAMA RESIDENCY AT MANHATTAN SCHOOL FOR CHILDREN, TWO ARTISTS IN RESIDENCE FOR THE THEATER WING'S 'PLANTING NEW SEEDS' PROGRAM, AND AN INTERNSHIP PROGRAM.

(Code) (Expenses \$ 36,512 including grants of \$) (Revenue \$)

THE BIRNBAUM MUSIC LIBRARY SERVES THE DIVERSE POPULATIONS OF KAUFMAN MUSIC CENTER WITH ITS COMPREHENSIVE COLLECTION OF ISRAELI MUSIC AND TAPES, THE LIBRARY IS AVAILABLE TO COMPOSERS AND PERFORMERS ALIKE. FACULTY AND STUDENTS OF BOTH KAUFMAN MUSIC CENTER SCHOOLS CAN FIND REPERTOIRE THEY NEED TO TEACH OR PERFORM.