

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 **JUN 1, 2019** and ending **MAY 31, 2020**

B Check if applicable: <input checked="" 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 ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED		D Employer identification number 04-2593591
	Doing business as		E Telephone number 617-951-0010
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1000 WASHINGTON STREET, 2ND FLOOR	G Gross receipts \$ 13,596,376.	
	City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02118	F Name and address of principal officer: CATHERINE EDWARDS SAME AS C ABOVE	
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.NEFA.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: 1969	M State of legal domicile: MA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: NEFA INVESTS IN ARTISTS AND COMMUNITIES AND FOSTERS EQUITABLE ACCESS TO THE ARTS, ENRICHING THE
	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 23
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 23
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 25
	6 Total number of volunteers (estimate if necessary) 6 40
	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 39 7b 0.
Revenue	8 Contributions and grants (Part VIII, line 1h) 9,488,769. 10,055,347.
	9 Program service revenue (Part VIII, line 2g) 147,563. 22,481.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 391,341. 829,208.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 10,027,673. 10,907,036.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,631,301. 4,445,013.
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,146,326. 2,472,720.
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 299,502.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,763,545. 1,656,685.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,541,172. 8,574,418.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12 486,501. 2,332,618.
	20 Total assets (Part X, line 16) 24,620,567. 27,972,047.
	21 Total liabilities (Part X, line 26) 3,899,585. 4,598,493.
	22 Net assets or fund balances. Subtract line 21 from line 20 20,720,982. 23,373,554.

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 _____ Date _____				
	CATHERINE EDWARDS, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ALYSSA SIMARD, CPA	Preparer's signature ALYSSA SIMARD, CPA	Date _____	Check if self-employed <input type="checkbox"/>	PTIN P01610394
	Firm's name MELANSON, P.C.			Firm's EIN 02-0354851	
	Firm's address 10 NEW ENGLAND BUSINESS CENTER DRIVE ANDOVER, MA 01810			Phone no. 978-749-0005	

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

1 Briefly describe the organization's mission:
NEFA INVESTS IN ARTISTS AND COMMUNITIES AND FOSTERS EQUITABLE ACCESS TO THE ARTS, ENRICHING THE CULTURAL LANDSCAPE IN NEW ENGLAND AND THE NATION.

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

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

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

4a (Code:) (Expenses \$ 2,851,476. including grants of \$ 2,232,488.) (Revenue \$)
NATIONAL DANCE PROJECT (NDP) - PROVIDES SUPPORT FOR THE CREATION AND TOURING OF DANCE WORK THROUGH GRANTS TO DANCE ARTISTS AND PRESENTERS; FOSTERS COMMUNITY ENGAGEMENT AND INTERNATIONAL EXCHANGE; AND THROUGH SPECIAL INITIATIVES, CREATES OPPORTUNITIES FOR DANCE ARTISTS AT VARIOUS STAGES IN THEIR CAREERS.

4b (Code:) (Expenses \$ 1,646,543. including grants of \$ 1,082,191.) (Revenue \$)
NATIONAL THEATER PROJECT (NTP) - EXPLORES CREATING A SYSTEM OF SUPPORT FOR PROFESSIONAL ARTIST-LED COLLABORATIVE, DEVISED THEATER. MODELED AFTER NEFA'S NATIONAL DANCE PROJECT, THE PROGRAM SUPPORTS ENSEMBLE THEATER DEVELOPMENT AND TOURING IN THE UNITED STATES.

4c (Code:) (Expenses \$ 1,404,373. including grants of \$ 666,084.) (Revenue \$ 22,481.)
NEW ENGLAND PRESENTING AND TOURING - PROVIDES FINANCIAL AND PROFESSIONAL SUPPORT TO NEW ENGLAND ARTISTS AND ARTS ORGANIZATIONS TO FOSTER THE DEVELOPMENT AND SHARING OF CREATIVE WORK; THE PROGRAM STRIVES TO REACH POPULATIONS FOR WHOM ACCESS IS MORE LIMITED

4d Other program services (Describe on Schedule O.)
(Expenses \$ 1,030,939. including grants of \$ 464,250.) (Revenue \$)

4e Total program service expenses **6,933,331.**

**NEW ENGLAND FOUNDATION FOR THE ARTS ,
INCORPORATED**

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>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	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>		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>		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>		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>		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>		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>		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>	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>	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>	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>		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>		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>		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>		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>		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>	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>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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>		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>		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>		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>		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>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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>	X	

**NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED**

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>		
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	

**NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED**

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		25
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X
If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
If "Yes," complete Form 4720, Schedule O.			

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.		
	1a 23		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 23		
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?		
10b			
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	
12c		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?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **MA, NY**
- 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 **▶**
THE ORGANIZATION - 617-951-0010
1000 WASHINGTON STREET, 2ND FLOOR, BOSTON, MA 02118

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) CRISTAL BROWN DIRECTOR	1.00	X					0.	0.	0.	
(2) TAYLOR BYNUM DIRECTOR	1.00	X					0.	0.	0.	
(3) AMY ELLSWORTH SECRETARY	1.50	X					0.	0.	0.	
(4) GEOFFREY HARGADON DIRECTOR	1.00	X					0.	0.	0.	
(5) JOHN HENRY VICE-CHAIR	1.00	X					0.	0.	0.	
(6) DOUGLAS KEITH TREASURER	1.50	X					0.	0.	0.	
(7) GINNIE LUPI DIRECTOR	1.00	X					0.	0.	0.	
(8) KAREN MITTELMAN DIRECTOR	1.00	X					0.	0.	0.	
(9) BARBARA MURPHY DIRECTOR	1.00	X					0.	0.	0.	
(10) CHIP NEWELL DIRECTOR	1.00	X					0.	0.	0.	
(11) KRISTINA NEWMAN-SCOTT DIRECTOR	1.00	X					0.	0.	0.	
(12) JULIE RICHARD DIRECTOR	1.00	X					0.	0.	0.	
(13) RANDALL ROSENBAUM DIRECTOR	1.00	X					0.	0.	0.	
(14) LARRY SIMPSON DIRECTOR	1.50	X					0.	0.	0.	
(15) ANN SMITH CHAIR	1.50	X					0.	0.	0.	
(16) PAMELA TATGE DIRECTOR	1.00	X					0.	0.	0.	
(17) TED WENDELL DIRECTOR	1.00	X					0.	0.	0.	

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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) MARCO WERMAN DIRECTOR	1.00	X					0.	0.	0.	
(19) LISA WONG DIRECTOR	1.00	X					0.	0.	0.	
(20) CARRIE ZASLOW DIRECTOR	1.00	X					0.	0.	0.	
(21) IVAN ESPINOZA-MADRIGAL DIRECTOR	1.00	X					0.	0.	0.	
(22) MIN JUNG KIM DIRECTOR	1.00	X					0.	0.	0.	
(23) ELIZABETH SHAPIRO DIRECTOR	1.00	X					0.	0.	0.	
(24) CATHERINE EDWARDS EXECUTIVE DIRECTOR	40.00			X			174,441.	0.	3,328.	
(25) JANE PRESTON DEPUTY DIRECTOR; ASST SECR	40.00			X			131,581.	0.	3,328.	
(26) JUG CHOKSHI DIRECTOR OF FINANCE & ADMIN AND ASST	40.00			X			126,513.	0.	3,328.	
1b Subtotal							432,535.	0.	9,984.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							432,535.	0.	9,984.	

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 **3**

	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>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
LISA BOOTH MANAGEMENT, INC. 22 MILTIADES AVENUE, RIVERSIDE, CT 06878	MANAGEMENT, RESEARCH & DEVELOPMENT, & PL	175,000.
LAST CALL MEDIA, INC. 6 LIBERTY SQUARE PMB #401, BOSTON, MA 02109	WEBSITE DEVELOPER	138,600.

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 **2**

NEW ENGLAND FOUNDATION FOR THE ARTS,
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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					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,436,504.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	8,618,843.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 12,587.				
	h Total. Add lines 1a-1f			10,055,347.			
Program Service Revenue	2 a SERVICE FEES	Business Code					
		900099	22,481.	22,481.			
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			22,481.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		288,984.			288,984.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	3,229,564.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	2,689,340.				
	c Gain or (loss)	7c	540,224.				
	d Net gain or (loss)			540,224.		540,224.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
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	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			10,907,036.	22,481.	0.	829,208.	

**NEW ENGLAND FOUNDATION FOR THE ARTS,
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Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) 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	4,159,007.	4,159,007.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	286,006.	286,006.		
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	538,473.	243,041.	247,618.	47,814.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,447,781.	858,646.	465,016.	124,119.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	55,466.	32,083.	18,536.	4,847.
9 Other employee benefits	273,688.	181,452.	65,551.	26,685.
10 Payroll taxes	157,312.	88,362.	55,270.	13,680.
11 Fees for services (nonemployees):				
a Management	120,000.	120,000.		
b Legal	5,750.	750.	5,000.	
c Accounting	48,164.	1,500.	46,664.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	73,293.		73,293.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	175,372.	117,389.	57,979.	4.
12 Advertising and promotion	68,968.	46,836.	22,132.	
13 Office expenses	80,289.	47,083.	28,498.	4,708.
14 Information technology	72,526.	41,504.	23,782.	7,240.
15 Royalties				
16 Occupancy	297,106.	176,037.	93,816.	27,253.
17 Travel	219,231.	175,494.	38,612.	5,125.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	211,927.	150,028.	34,984.	26,915.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	55,818.	32,851.	17,895.	5,072.
23 Insurance	8,873.	5,446.	3,427.	
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 HONORARIA	145,225.	139,350.	3,875.	2,000.
b MISCELLANEOUS	49,673.	22,960.	22,714.	3,999.
c PROFESSIONAL DEVELOPMEN	24,470.	7,506.	16,923.	41.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	8,574,418.	6,933,331.	1,341,585.	299,502.
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)

**NEW ENGLAND FOUNDATION FOR THE ARTS,
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Part X Balance Sheet

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

		(A) Beginning of year			(B) End of year	
Assets	1 Cash - non-interest-bearing	8,980,845.	1		8,682,723.	
	2 Savings and temporary cash investments	61,847.	2		47,234.	
	3 Pledges and grants receivable, net	5,210,190.	3		8,526,862.	
	4 Accounts receivable, net		4			
	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	24,634.	9		49,806.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	537,489.				
	b Less: accumulated depreciation	396,663.				
	11 Investments - publicly traded securities	71,693.	10c		140,826.	
	12 Investments - other securities. See Part IV, line 11	10,258,631.	11		10,511,869.	
	13 Investments - program-related. See Part IV, line 11		12			
	14 Intangible assets		13			
	15 Other assets. See Part IV, line 11	12,727.	14		12,727.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	24,620,567.	15		27,972,047.		
Liabilities	17 Accounts payable and accrued expenses	306,038.	16		320,470.	
	18 Grants payable	3,531,700.	17		3,883,866.	
	19 Deferred revenue		18		346,923.	
	20 Tax-exempt bond liabilities		19			
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	61,847.	20		47,234.	
	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		21			
	23 Secured mortgages and notes payable to unrelated third parties		22			
	24 Unsecured notes and loans payable to unrelated third parties		23			
	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		24			
	26 Total liabilities. Add lines 17 through 25	3,899,585.	25		4,598,493.	
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	6,223,011.	26		6,449,779.	
	28 Net assets with donor restrictions	14,497,971.	27		16,923,775.	
	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		28			
	30 Paid-in or capital surplus, or land, building, or equipment fund		29			
	31 Retained earnings, endowment, accumulated income, or other funds		30			
	32 Total net assets or fund balances	20,720,982.	31		23,373,554.	
33 Total liabilities and net assets/fund balances	24,620,567.	32		27,972,047.		

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,907,036.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,574,418.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,332,618.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,720,982.
5	Net unrealized gains (losses) on investments	5	319,954.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	23,373,554.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain 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	
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 on Schedule O and describe any steps taken to undergo such audits _____	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization **NEW ENGLAND FOUNDATION FOR THE ARTS ,**
INCORPORATED **Employer identification number**
04-2593591

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.")	2,349,384.	11,406,089.	6,550,553.	9,488,769.	9,955,347.	39,750,142.
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	2,349,384.	11,406,089.	6,550,553.	9,488,769.	9,955,347.	39,750,142.
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)						22,309,815.
6 Public support. Subtract line 5 from line 4.						17,440,327.

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	2,349,384.	11,406,089.	6,550,553.	9,488,769.	9,955,347.	39,750,142.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	220,160.	220,414.	199,713.	38,146.	72,631.	751,064.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						40,501,206.
12 Gross receipts from related activities, etc. (see instructions)					12	503,487.
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	43.06 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	48.04 %
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 .		
11a		
11b		
11c		

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.		
1		
2		

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).		
1		

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.		
1		
2		
3		

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.			
2a			
2b			
3a			
3b			

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).		

NEW ENGLAND FOUNDATION FOR THE ARTS,

Schedule A (Form 990 or 990-EZ) 2019 **INCORPORATED**

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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

NEW ENGLAND FOUNDATION FOR THE ARTS,

Schedule A (Form 990 or 990-EZ) 2019 INCORPORATED

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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.)

Horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

**NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED**

Employer identification number

04-2593591

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization NEW ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED	Employer identification number 04-2593591
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE ANDREW W. MELLON FOUNDATION 140 EAST 62ND STREET NEW YORK, NY 10065	\$ 5,682,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	DORIS DUKE CHARITABLE FOUNDATION 650 FIFTH AVENUE, 19TH FLOOR NEW YORK, NY 10019	\$ 2,085,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	NATIONAL ENDOWMENT FOR THE ARTS 400 7TH STREET SW WASHINGTON, DC 20506	\$ 1,092,127.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	BARR FOUNDATION 2 ATLANTIC AVENUE BOSTON, MA 02110	\$ 450,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	U.S DEPARTMENT OF STATE 10 CAUSEWAY STREET BOSTON, MA 02222	\$ 246,603.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NEW ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED	Employer identification number 04-2593591
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization NEW ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED	Employer identification number 04-2593591
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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 ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED Employer identification number 04-2593591

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 yes/no 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, total number and acreage, number of easements on historic structures, and monitoring details.

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 reporting requirements for art collections and amounts for revenue and assets.

**NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED**

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 <input type="checkbox"/> Public exhibition | d <input type="checkbox"/> Loan or exchange program |
| b <input type="checkbox"/> Scholarly research | e <input type="checkbox"/> Other _____ |
| c <input type="checkbox"/> Preservation for future generations | |
- 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	4,644,109.	4,539,674.	4,306,868.	4,053,500.	
b Contributions	45,000.	32,813.			4,110,918.
c Net investment earnings, gains, and losses	541,344.	301,496.	455,511.	461,430.	-30,003.
d Grants or scholarships					
e Other expenditures for facilities and programs	458,306.	206,898.	187,822.	181,586.	
f Administrative expenses	36,838.	22,976.	34,883.	26,476.	27,415.
g End of year balance	4,735,309.	4,644,109.	4,539,674.	4,306,868.	4,053,500.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 100.00 %
- b** Permanent endowment ▶ _____ %
- c** Term endowment ▶ _____ %
- 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 checked="" type="checkbox"/> |
| (ii) Related organizations | | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		176,599.	152,224.	24,375.
d Equipment		16,201.	15,996.	205.
e Other		344,689.	228,443.	116,246.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				140,826.

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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

**NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED**

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	11,153,697.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a	319,954.	
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		319,954.
3 Subtract line 2e from line 1		3	10,833,743.
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	73,293.	
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	4c		73,293.
5 Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	10,907,036.

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	8,501,125.
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		0.
3 Subtract line 2e from line 1		3	8,501,125.
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	73,293.	
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	4c		73,293.
5 Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	8,574,418.

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 IV, LINE 2B:

NEFA WAS A FISCAL AGENT FOR THE MASSACHUSETTS AND NEW HAMPSHIRE STATE ARTS AGENCIES. IN ACCORDANCE WITH NEFA'S BY-LAWS, SENIOR LEADERS OF THE ABOVE-MENTIONED AGENCIES, AS WELL AS THE CONNECTICUT, MAINE, RHODE ISLAND, AND VERMONT STATE ARTS AGENCIES, ARE ALSO BOARD MEMBERS OF NEFA. EACH OF THESE AGENCIES ALSO FUNDS NEFA

**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 ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED** Employer identification number
04-2593591

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
DANCERS' GROUP INC. 44 GOUGH STREET #201 SAN FRANCISCO, CA 94103	94-2879185	501(C)(3)	144,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
DC WHEEL PRODUCTIONS, INC. / DANCE PLACE - 3225 8TH STREET NE - WASHINGTON, DC 20017	52-1118504	501(C)(3)	80,735.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ART2ACTION, INC. 15703 BLAIR COURT TAMPA, FL 33647	27-3413890	501(C)(3)	80,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE JOYCE THEATER FOUNDATION, INC. 175 EIGHTH AVENUE NEW YORK, NY 10011	13-3038262	501(C)(3)	78,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
NEW YORK LIVE ARTS, INC. 219 WEST 19TH STREET NEW YORK, NY 10011	13-6206608	501(C)(3)	75,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
DANCING GROUNDS 3705 ST. CLAUDE AVE. NEW ORLEANS, LA 70117	45-5084235	501(C)(3)	73,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 116.**

3 Enter total number of other organizations listed in the line 1 table **▶ 0.**

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

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW BROOKLYN THEATRE 202 BALTIC ST. #3 BROOKLYN, NY 11201	45-5507837	501(C)(3)	73,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SPACE GALLERY 538 CONGRESS STREET PORTLAND, ME 04101	51-0432635	501(C)(3)	71,048.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ALTERNATE ROOTS 1270 CAROLINE ST - BOX D120-353 ATLANTA, GA 30307	58-1318198	501(C)(3)	70,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
RAGAMALA DANCE 711 WEST LAKE STREET SUITE 309 MINNEAPOLIS, MN 55408	41-1747144	501(C)(3)	70,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CIRCUIT NETWORK 499 ALABAMA STREET SUITE 203 SAN FRANCISCO, CA 94110	94-2917575	501(C)(3)	68,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
NICHOLE CANUSO DANCE COMPANY 1413 MOORE ST. PHILADELPHIA, PA 19145	23-3078345	501(C)(3)	68,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
OPEN THE CIRCLE 2735 NORTH DAYTON ST. CHICAGO, IL 60614	82-2527647	501(C)(3)	68,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
PIONEER WINTER COLLECTIVE 14640 NW 17TH DRIVE MIAMI, FL 33167	81-3540211	501(C)(3)	68,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ROSANNA GAMSON/WORLD WIDE, INC 343 LAVETA TERRACE LOS ANGELES, CA 90026	91-1986400	501(C)(3)	68,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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STEP AFRIKA! USA INC. 1333 H ST. NE WASHINGTON, DC 20002	52-2118391	501(C)(3)	68,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ANANYA DANCE THEATER PO BOX 2427 MINNEAPOLIS, MN 55402-0427	20-4261878	501(C)(3)	65,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CABD, INC. P.O. BOX 340600 JAMAICA, NY 11434	81-4331402	501(C)(3)	65,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
NEW DANCE THEATRE, INC. 119 PARK AVENUE WEST DENVER, CO 80205	84-0632111	501(C)(3)	65,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
A HOST OF PEOPLE 256 W GRAND BLVD DETROIT, MI 48216	46-3492862	501(C)(3)	60,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
DANCE IQUAIL! 3500 LANCASTER AVE. PHILADELPHIA, PA 19104	80-0153273	501(C)(3)	60,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SPIDERWOMAN THEATRE WORKSHOP, INC 333 DEGRAW ST. BROOKLYN, NY 11231	13-2976879	501(C)(3)	60,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
BODYTRAFFIC 1171 SOUTH ROVERSTON BLVD. SUITE 19 LOS ANGELES, CA 90035	26-1943897	501(C)(3)	55,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
TEATRO LUNA WEST 2009 EAST FIRST ST. LOS ANGELES, CA 90033	83-1082601	501(C)(3)	55,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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THE PHILADELPHIA DANCE COMPANY 9 NORTH PRESTON STREET PHILADELPHIA, PA 19104-2210	23-7161084	501(C)(3)	55,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SU TEATRO INC. 721 SANTA FE DRIVE DENVER, CO 80204	74-2440659	501(C)(3)	50,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE THEATER OFFENSIVE 565 BOYLSTON STREET, 3RD FLOOR BOSTON, MA 02116	04-3039900	501(C)(3)	50,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ALLIANCE OF ARTIST COMMUNITIES 144 WESTMINSTER STREET PROVIDENCE, RI 02903	58-2138525	501(C)(3)	48,100.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MASSACHUSETTS CULTURAL COUNCIL 10 SAINT JAMES AVENUE, FL 3 BOSTON, MA 02116	04-6002284	501(C)(3)	48,100.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CONNECTICUT DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT - 450 COLUMBUS BOULEVARD, SUITE 5 - HARTFORD, CT 06103	30-0566789	501(C)(3)	48,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
VERMONT ARTS COUNCIL 136 STATE STREET MONTPELIER, VT 05633	03-0218115	501(C)(3)	48,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MAINE ARTS COMMISSION 193 STATE STREET STATE HOUSE STATIO AUGUSTA, ME 04333	01-6000001	501(C)(3)	47,100.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT.
NEW HAMPSHIRE STATE COUNCIL ON THE ARTS - 19 PILLSBURY STREET - CONCORD, NH 03301	02-0317350	501(C)(3)	47,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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JACOB'S PILLOW DANCE FESTIVAL, INC. - 358 GEORGE CARTER ROAD - BECKET, MA 01223-4001	04-6002993	501(C)(3)	39,300.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
FIRSTWORKS 275 WESTMINSTER STREET SUITE 501 PROVIDENCE, RI 02903	22-2597014	501(C)(3)	32,284.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT.
THE YARD, INC. P.O. BOX 405 CHILMARK, MA 02535	23-7348937	501(C)(3)	32,160.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
PORTLAND OVATIONS 50 MONUMENT SQUARE, 2ND FLOOR PORTLAND, ME 04101	01-0350707	501(C)(3)	31,180.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
STIGGITYSTACKZ WORLDWIDE INC 126 BORDER STREET #109 BOSTON, MA 02128	82-0767444	501(C)(3)	28,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE DANCE COMPLEX, INC. 536 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	04-3131964	501(C)(3)	26,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
RHYTHM VISIONS PRODUCTION COMPANY, INC. - 612 M STREET NW, UNIT B - WASHINGTON, DC 20001	04-3321776	501(C)(3)	25,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
TEADA PRODUCTIONS 522 WILSHIRE BLVD, SUITE H SANTA MONICA, CA 90401	95-4766870	501(C)(3)	24,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
FLYNN CENTER FOR THE PERFORMING ARTS, LIMITED - 153 MAIN STREET - BURLINGTON, VT 05401	03-0277052	501(C)(3)	23,700.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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YOUTH SPEAKS, INC. 1663 MISSION STREET, SUITE 306 SAN FRANCISCO, CA 94103	91-2134499	501(C)(3)	20,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
BROOKLYN ARTS EXCHANGE, INC. 421 FIFTH AVENUE BROOKLYN, NY 11215	11-3071458	501(C)(3)	19,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CONTEMPORARY ARTS CENTER 900 CAMP STREET NEW ORLEANS, LA 70130	72-0798830	501(C)(3)	18,442.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
KEENE STATE COLLEGE, UNIVERSITY SYSTEM OF NH - 229 MAIN STREET - KEENE, NH 03435	02-6000937	501(C)(3)	18,351.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
PANGEA WORLD THEATER 711 WEST LAKE STREET SUITE 101 MINNEAPOLIS, MN 55408	41-1854164	501(C)(3)	17,900.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT.
URBANO PROJECT, INC. 29 GERMANIA STREET JAMAICA PLAIN, MA 02130	45-5436379	501(C)(3)	17,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ST JOSEPH COLLEGE - UNIVERSITY OF SAINT JOSEPH - 1678 ASYLUM AVENUE - WEST HARFORD, CT 06117-2791	06-0646829	501(C)(3)	16,778.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
PINKERTON ACADEMY 5 PINKERTON STREET DERRY, NH 03038	02-0223338	501(C)(3)	16,550.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ARTSPOT PRODUCTIONS, INC. 609 SAINT FERDINAND STREET NEW ORLEANS, LA 70117	72-1499547	501(C)(3)	16,300.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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NOW + THERE INC. 108 LINCOLN STREET #6A BOSTON, MA 02111	04-2712823	501(C)(3)	15,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC. - 185 KNEELAND STREET, 2ND FLOOR - BOSTON, MA 02111	20-1678932	501(C)(3)	15,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE INSTITUTE OF CONTEMPORARY ART 25 HARBOR SHORE DRIVE BOSTON, MA 02210	04-2104327	501(C)(3)	15,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
TSNE MISSIONWORKS 89 SOUTH STREET, SUITE 700 BOSTON, MA 02111	04-2261109	501(C)(3)	15,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
TRUSTEES OF DARTMOUTH COLLEGE 7 LEBANON STREET, SUITE 302 HANOVER, NH 03755	02-0222111	501(C)(3)	14,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ALLIED MEDIA PROJECTS 4126 THIRD ST. DETROIT, MI 48201	01-0559608	501(C)(3)	14,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
HALEAKALA, INC. 512 WEST 19TH STREET NEW YORK, NY 10011	13-2829756	501(C)(3)	14,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
PRESIDENT AND TRUSTEES OF BATES COLLEGE - 2 ANDREWS ROAD, 221 LANE HALL - LEWISTON, ME 04240	01-0211781	501(C)(3)	13,420.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
BOOM ARTS, INC. 3121 SW MOODY AVE PORTLAND, OR 97239	47-2199079	501(C)(3)	13,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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GLOBAL ARTS LIVE 720 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	22-3036665	501(C)(3)	12,700.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
NATIONAL PERFORMANCE NETWORK 8121 FIG STREET NEW ORLEANS, LA 70118	06-1522546	501(C)(3)	12,380.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
PRESIDENTS AND FELLOWS OF MIDDLEBURY COLLEGE - 84 S SERVICE ROAD - MIDDLEBURY, VT 05753	03-0179298	501(C)(3)	12,360.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE JOHN AND MABLE RINGLING MUSEUM OF ART FOUNDATION, INC. - 5401 BAY SHORE ROAD - SARASOTA, FL 34243	59-6214423	501(C)(3)	12,345.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
UNIVERSITY OF MASSACHUSETTS - AMHERST - 100 VENTURE WAY SUITE 9 - HADLEY, MA 01035-9450	04-3167352	501(C)(3)	11,750.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ALABAMA DANCE COUNCIL, INC. PO BOX 2126 BIRMINGHAM, AL 35201	63-0815232	501(C)(3)	11,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
INTERSECTION FOR THE ARTS 1446 MARKET ST. SAN FRANCISCO, CA 94102	94-1593216	501(C)(3)	11,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CAPE FEAR COMMUNITY COLLEGE FOUNDATION, INC. - 411 N. FRONT STREET - WILMINGTON, NC 28401	58-1308578	501(C)(3)	10,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
UNIVERSITY OF UTAH 1395 EAST PRESIDENTS CIRCLE - KINGSBURY HALL - SALT LAKE CITY, UT 84112-0922	87-6000525	501(C)(3)	10,454.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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ADRIENNE ARSHT CENTER TRUST INC. 1300 BISCAYNE BLVD. MIAMI, FL 33132	65-0353695	501(C)(3)	10,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ARTS AND SCIENCE COUNCIL 227 WEST TRADE ST. CHARLOTTE, NC 28202	56-0693436	501(C)(3)	10,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MANN CENTER FOR THE PERFORMING ARTS - 123 SOUTH BROAD ST. #815 - PHILADELPHIA, PA 19109	23-1473884	501(C)(3)	10,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MIXED BLOOD THEATRE COMPANY 1501 S 4TH STREET MINNEAPOLIS, MN 55454	41-1377499	501(C)(3)	10,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MYTHIC IMAGINATION INSTITUTE 659 AUBURN AVENUE #266 ATLANTA, GA 30312	58-2063415	501(C)(3)	10,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SOZO IMPACT, INC. 5422 HILLTOP CRESCENT OAKLAND, CA 94618	82-4956112	501(C)(3)	10,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
LA MAMA EXPERIMENTAL THEATRE CLUB 74A EAST 4TH STREET NEW YORK, NY 10003	13-2620861	501(C)(3)	9,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
NEW HAVEN INTERNATIONAL FESTIVAL OF ARTS AND IDEAS, INC. - 195 CHURCH STREET, FL 12 - NEW HAVEN, CT 06510	06-1444222	501(C)(3)	9,345.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
WESLEYAN UNIVERSITY 237 HIGH STREET MIDDLETOWN, CT 06459	06-0646959	501(C)(3)	9,020.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

Schedule I (Form 990)

NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KESHET DANCE AND CENTER FOR THE ARTS - 4121 CUTLER AVE. NE - ALBUQUERQUE, NM 87110	85-0436623	501(C)(3)	9,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ROCKPORT MUSIC INC. 16 MAIN ST. ROCKPORT, MA 01966	22-2479696	501(C)(3)	8,875.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE CARPETBAG THEATRE, INC. 3018 EAST 5TH AVE. KNOXVILLE, TN 37914	23-7138914	501(C)(3)	7,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MADISON PROJECT D/B/A THE BROAD STAGE - 1900 PICO BLVD - SANTA MONICA, CA 90405	41-2221712	501(C)(3)	7,397.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SANDGLASS CENTER FOR THEATER AND PUPPETRY RESEARCH - 17 KIMBALL HILL - PO BOX 970 - PUTNEY, VT 05346	04-3340533	501(C)(3)	7,100.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
AFRIKAI LLC 2136 WASHINGTON ST. ROXBURY, MA 02119	82-0885179	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ASIAN COMMUNITY DEVELOPMENT CORPORATION - 38 OAK ST. - BOSTON, MA 02111	04-2999263	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
EASTIE FARM 213 WEBSTER ST. #2 BOSTON, MA 02128	47-5540982	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
GLOBAL INITIATIVE FOR INDIGENOUS ADVANCEMENT INC. - 15 GREENVILLE ST. - BOSTON, MA 02119	04-3542461	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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MICHIGAN OPERA THEATRE 1526 BROADWAY DETROIT, MI 48226	38-2052726	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE PRESIDENT AND TRUSTEES OF WILLIAMS COLLEGE - P.O. BOX 624 - WILLIAMSTOWN, MA 01267	04-2104847	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THREE SQUARES MAIN STREET INC. 329 CENTRE ST. JAMAICA PLAIN, MA 02130	04-3408666	501(C)(3)	7,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
UNIVERSITY OF IOWA 105 JESSUP HALL IOWA CITY, IA 52242	42-6004813	501(C)(3)	6,800.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CONNECTICUT COLLEGE 270 MOHEGAN AVENUE NEW LONDON, CT 06320-4196	06-0646587	501(C)(3)	6,775.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
FOUNDATION FOR SELF LEADERSHIP PO BOX 873 UNION, NJ 07083	20-1318139	501(C)(3)	6,500.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
UNION EPISCOPAL CHURCH P.O. BOX 902 CLAREMONT, NH 03743	02-6007515	501(C)(3)	6,310.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
EMERSON COLLEGE 120 BOYLSTON STREET BOSTON, MA 02116	04-1286950	501(C)(3)	6,100.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
FAIRFIELD UNIVERSITY 1073 NORTH BENSON ROAD FAIRFIELD, CT 06824	06-0646623	501(C)(3)	6,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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LAWRENCE FAMILY JEWISH COMMUNITY CENTER - 4126 EXECUTIVE DRIVE - LA JOLLA, CA 92037	95-1985444	501(C)(3)	6,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SALAAM CULTURAL MUSEUM 3806 WHITMAN AVE NORTH SEATTLE, WA 98103	91-1481782	501(C)(3)	6,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
SKIRBALL CULTURAL CENTER 2701 N SEPULVEDA BLVD LOS ANGELES, CA 90049	95-4538371	501(C)(3)	6,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
NEXT STAGE ARTS PROJECT, INC. PO BOX 251 PUTNEY, VT 05346	45-2157212	501(C)(3)	5,710.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
UNIVERSITY OF FLORIDA P.O. BOX 113201, 33 TIGERT HALL GAINESVILLE, FL 32611	59-6002052	501(C)(3)	5,700.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
AMERICAN DANCE FESTIVAL, INCORPORATED - 715 BROAD STREET - DURHAM, NC 27705	06-0932294	501(C)(3)	5,553.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
WOONSOCKET NEIGHBORHOOD DEVELOPMENT CORPORATION - 719 FRONT STREET #103 - WOONSOCKET, RI 02895	22-2907602	501(C)(3)	5,261.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
BARYSHNIKOV ARTS CENTER, INC. 450 WEST 37TH STREET, SUITE 501 NEW YORK, NY 10018	13-3031485	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
BOSTON MEDICAL CENTER CORPORATION ONE BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118	04-3314093	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALPULLI MEXICAN DANCE COMPANY, INC. - 2512 77TH STREET - EAST ELMHURST, NY 11370	20-0642440	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
CLEVELAND MODERN DANCE ASSOCIATION 13110 SHAKER SQUARE, SUITE 106 CLEVELAND, OH 44120	34-6561006	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ISLANDIA MUSIC INC. 2737 PALISADE AVE. RIVERDALE, NY 10463	26-2564933	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
MUSEUM OF CONTEMPORARY ART 220 EAST CHICAGO AVENUE CHICAGO, IL 60611-2643	36-6154098	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
OPEN CHANNELS NEW YORK D/B/A DIXON PLACE - 161A CHRYSSTIE ST. - NEW YORK, NY 10002	13-3486263	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE ALDRICH CONTEMPORARY ART MUSEUM, INC - 258 MAIN STREET - RIDGEFIELD, CT 06877	06-6069965	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE COLONIAL THEATRE GROUP, INC. 95 MAIN STREET KEENE, NH 03431	02-0466087	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
THE RAYMOND F. KRAVIS CENTER FOR THE PERFORMING ARTS, INC. - 701 OKEECHOBEE BOULEVARD - WEST PALM BEACH, FL 33401	59-2245054	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
UNIVERSITY OF MASSACHUSETTS BOSTON M 5-623, 100 MORISSEY BLVD. BOSTON, MA 02125-3393	04-3167352	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YERBA BUENA CENTER FOR THE ARTS 701 MISSION STREET SAN FRANCISCO, CA 94103	94-3042571	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT
ZEITERION THEATRE, INC. 684 PURCHASE STREET PO BOX 4084 NEW BEDFORD, MA 02740	04-2845276	501(C)(3)	5,000.	0.			GENERAL OPERATING, CREATION AND/OR PRESENTING SUPPORT.

Schedule I (Form 990)

**NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED**

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
CREATION OF NEW WORK	97	286,006.	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:

NEFA MAINTAINS COMMUNICATION WITH GRANTEEES AND REQUIRES FINAL AND/OR INTERIM REPORTS TO BE SUBMITTED BY GRANTEEES. REPORTS ARE REVIEWED BY APPROPRIATE GRANT STAFF AND DISBURSEMENTS OF GRANT FUNDS ARE MADE UPON APPROVAL OF REPORTS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization **NEW ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED**

Employer identification number
04-2593591

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 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 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 checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input 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		
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

NEW ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED

Schedule J (Form 990) 2019

04-2593591

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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) CATHERINE EDWARDS EXECUTIVE DIRECTOR	(i)	174,441.	0.	0.	2,358.	970.	177,769.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(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.

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 ENGLAND FOUNDATION FOR THE ARTS,
INCORPORATED

Employer identification number
04-2593591

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

CULTURAL LANDSCAPE IN NEW ENGLAND AND THE NATION.

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

CENTER STAGE - AN INTERNATIONAL EXCHANGE PROGRAM THAT WILL BRING
PERFORMING ARTISTS FROM AROUND THE GLOBE TO TOUR THROUGHOUT THE U.S.
THE PROGRAM IS AN EFFORT TO DEMONSTRATE RESPECT AND UNDERSTANDING OF
CULTURES BY BRINGING INTERNATIONAL PERFORMING ARTISTS TO THE U.S. SO
THAT AMERICANS CAN GROW IN APPRECIATION AND UNDERSTANDING OF OTHER
NATIONS, WHILE PROVIDING OPPORTUNITIES TO INTERNATIONAL PERFORMERS.
EXPENSES \$ 266,577. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

PUBLIC ART - PROVIDES FINANCIAL AND PROFESSIONAL SUPPORT TO ARTISTS AND
ART ORGANIZATIONS TO FOSTER THE DEVELOPMENT OF PUBLIC ART
EXPENSES \$ 764,362. INCLUDING GRANTS OF \$ 464,250. REVENUE \$ 0.

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

THE 990 IS REVIEWED BY THE FINANCE AND AUDIT COMMITTEE, AS DESIGNATED BY
THE BOARD, BEFORE SUBMISSION, AND SIGNED BY THE DIRECTOR OF FINANCE & ADMIN
OR THE EXECUTIVE DIRECTOR.

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

ANNUAL STATEMENTS ARE REVIEWED BY THE BOARD CHAIR (FOR BOARD MEMBERS) OR
EXECUTIVE DIRECTOR (FOR STAFF MEMBERS) AND, IN THE EVENT OF A CONFLICT,
ACTION AS DEFINED IN THE CONFLICT OF INTEREST POLICY IS TAKEN..

Name of the organization NEW ENGLAND FOUNDATION FOR THE ARTS, INCORPORATED	Employer identification number 04-2593591
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FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S PERFORMANCE IS EVALUATED ANNUALLY BY THE CHAIR OF THE BOARD OF DIRECTORS WITH INVOLVEMENT OF THE EXECUTIVE COMMITTEE. THE COMPENSATION COMMITTEE REVIEWS AND SETS EXECUTIVE DIRECTOR COMPENSATION AND BENEFITS WITH REFERENCE TO COMPARABLES OF SIMILAR AGENCIES AND NON-PROFIT ORGANIZATIONS. THE COMMITTEES KEEP MINUTES TO DOCUMENT KEY DISCUSSION POINTS AND DECISIONS REACHED. THE COMPENSATION COMMITTEE CONSISTS OF BOARD MEMBERS INCLUDING THE CHAIR AND THE VICE-CHAIR.

THE COMPENSATION OF OTHER EMPLOYEES IS REVIEWED AND APPROVED ANNUALLY BY THE EXECUTIVE DIRECTOR.

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

NEFA'S FINANCIAL STATEMENTS ARE POSTED ON ITS WEBSITE, AND DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C

THE FINANCE AND AUDIT COMMITTEE OVERSEES THE SELECTION OF THE AUDITORS AND MEETS WITH THE AUDITORS AT THE CONCLUSION OF THE AUDIT PROCESS TO REVIEW THE YEAR-END RESULTS.