

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.

OMB No. 1545-0047

2019
Open to Public
Inspection

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization LOWER MANHATTAN CULTURAL COUNCIL, INC.		D Employer identification number 23-7348782
	Doing business as		
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number
	125 MAIDEN LANE, 2ND FLOOR		212-219-9401
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10038-4912		G Gross receipts \$ 4,852,557.
F Name and address of principal officer: FRANCIS GREENBURGER SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? Yes No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527			
J Website: WWW.LMCC.NET			
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		L Year of formation: 1973	M State of legal domicile: NY

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO CREATE A FERTILE & NURTURING ENVIRONMENT FOR ARTISTS & ART GROUPS (CONTINUED ON SCHEDULE O).		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	27
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	20
	6	Total number of volunteers (estimate if necessary)	6	27
	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)	Prior Year 6,928,934.	Current Year 4,572,177.
	9	Program service revenue (Part VIII, line 2g)	20,682.	59,500.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,519.	6,813.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-100,236.	89,761.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,864,899.	4,728,251.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,404,370.	1,501,175.
	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)	1,247,479.	1,344,765.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 212,613.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,288,164.	1,626,452.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,940,013.	4,472,392.
	19	Revenue less expenses. Subtract line 18 from line 12	2,924,886.	255,859.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 12,270,541.	End of Year 12,555,901.
	21	Total liabilities (Part X, line 26)	3,313,098.	3,342,599.
	22	Net assets or fund balances. Subtract line 21 from line 20	8,957,443.	9,213,302.

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	5/13/2021			
	Francis Greenburger, Treasurer	Date 5/13/2021			
Paid Preparer Use Only	Print/Type preparer's name JAMES J. REILLY	Preparer's signature James Reilly	Date 5/3/2021	Check if self-employed	PTIN P00183769
	Firm's name ▶ CONDON O'MEARA MCGINTY & DONNELLY LLP	Firm's EIN ▶ 13-3628255			
	Firm's address ▶ ONE BATTERY PARK PLAZA NEW YORK, NY 10004	Phone no. 212-661-7777			

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

Part III Statement of Program Service Accomplishments

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

☒ X

- 1**
- Briefly describe the organization's mission:

SEE SCHEDULE O.

- 2**
- Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

- 3**
- Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

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

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

4a (Code:) (Expenses \$ 1,885,375. including grants of \$ 1,501,175.) (Revenue \$)
GRANTS & SERVICES: SEE SCHEDULE O.**4b** (Code:) (Expenses \$ 1,581,542. including grants of \$) (Revenue \$)
ARTIST RESIDENCIES:STUDIO RESIDENCY PROGRAM THAT PROVIDES ARTISTS, WRITERS AND ART GROUPS
WORKING IN DIVERSE MEDIA AND GENRES WITH FREE WORKSPACE AND ACCESS TO
OTHER RESOURCES AND SERVICES.**4c** (Code:) (Expenses \$ 256,156. including grants of \$) (Revenue \$ 59,500.)
PROGRAMS:A VARIETY OF PUBLIC PROGRAMS (SYMPOSIA, CONFERENCES, PUBLIC ART
EXHIBITS, PERFORMANCES, AND FILM SCREENINGS) PRODUCED TO STIMULATE
INNOVATIVE ART AND DIALOGUE ON CONTEMPORARY URBAN ISSUES, AND TO BRING
ART TO DOWNTOWN AUDIENCES.

- 4d**
- Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,723,073.

Form 990 (2019)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 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>	23 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>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 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>	25a	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>	25b	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>	26	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>	27	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>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	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>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	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>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	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>	32	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>	33	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>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	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>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38 X	

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

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 120	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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 20		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
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?	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?		X
d If "Yes," indicate the number of Forms 8822 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? If "Yes," see instructions and file Form 4720, Schedule N.		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

Form 990 (2019)

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

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	27													
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.														
b Enter the number of voting members included on line 1a, above, who are independent		27												
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.)

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

Section C. Disclosure

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

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 COUNCIL - 212-219-9401**
125 MAIDEN LANE, 2ND FLOOR, NEW YORK, NY 10038-4912

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- 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) DIEGO S. SEGALINI EXECUTIVE DIRECTOR, FINANCE & ADMIN	50.00			X				161,448.	0.	12,833.
(2) LILI CHOPRA EXECUTIVE DIRECTOR, ARTISTIC PROGRAM	50.00			X				159,958.	0.	9,481.
(3) TIMUR GALEN CHAIR	3.00	X		X				0.	0.	0.
(4) KEVIN HOO VICE CHAIR	3.00	X		X				0.	0.	0.
(5) FRANCIS GREENBURGER TREASURER	3.00	X		X				0.	0.	0.
(6) KIMBERLY BROWN BLACKLOW SECRETARY & VICE CHAIR	3.00	X		X				0.	0.	0.
(7) DINO FUSCO DIRECTOR	3.00	X						0.	0.	0.
(8) ERIC JOHNSON DIRECTOR	3.00	X						0.	0.	0.
(9) DAVID JANSEN DIRECTOR	3.00	X						0.	0.	0.
(10) NEIL PARIKH DIRECTOR	3.00	X						0.	0.	0.
(11) SUSAN BOYLE DIRECTOR	3.00	X						0.	0.	0.
(12) JAY BERMAN DIRECTOR	3.00	X						0.	0.	0.
(13) BRUCE EHRMANN DIRECTOR	3.00	X						0.	0.	0.
(14) MARCIA CABAN DIRECTOR	3.00	X						0.	0.	0.
(15) GREG JAMES DIRECTOR	3.00	X						0.	0.	0.
(16) MEREDITH KANE DIRECTOR	3.00	X						0.	0.	0.
(17) SHARI HYMAN DIRECTOR	3.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANNE GOLDRACH DIRECTOR	3.00	X						0.	0.	0.
(19) PETER POULAKAKOS DIRECTOR	3.00	X						0.	0.	0.
(20) EKENE EZULIKE DIRECTOR	3.00	X						0.	0.	0.
(21) CRAIG SCHWITTER DIRECTOR	3.00	X						0.	0.	0.
(22) CINDY QUAN DIRECTOR	3.00	X						0.	0.	0.
(23) HUGH MCCANN DIRECTOR	3.00	X						0.	0.	0.
(24) MICHAEL ASHWORTH DIRECTOR	3.00	X						0.	0.	0.
(25) ADAM MEISTER DIRECTOR	3.00	X						0.	0.	0.
(26) CHERRIE NANNINGA DIRECTOR	3.00	X						0.	0.	0.
1b Subtotal								321,406.	0.	22,314.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								321,406.	0.	22,314.

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 **2**

- 3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3**
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4**
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5**

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

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[illegible]

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	376,000.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	3,090,540.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	1,105,637.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			4,572,177.			
Program Service Revenue	2 a PROGRAM	Business Code					
		900099		59,500.	59,500.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			59,500.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			6,813.			6,813.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(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	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 376,000. of contributions reported on line 1c). See Part IV, line 18	8a	206,966.				
	b Less: direct expenses	8b	124,306.				
	c Net income or (loss) from fundraising events			82,660.			82,660.
	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 OTHER INCOME	Business Code					
	b	900099		7,101.	7,101.		
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			7,101.			
	12 Total revenue. See instructions			4,728,251.	66,601.	0.	89,473.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,151,250.	1,151,250.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	349,925.	349,925.		
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	320,549.	191,791.	82,687.	46,071.
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	813,797.	486,911.	209,923.	116,963.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	132,142.	79,063.	34,087.	18,992.
10 Payroll taxes	78,277.	46,834.	20,192.	11,251.
11 Fees for services (nonemployees):				
a Management				
b Legal	26,133.		24,634.	1,499.
c Accounting	26,733.	21,648.	4,793.	292.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	46,110.	3,577.	40,094.	2,439.
12 Advertising and promotion	27,633.	21,907.	5,677.	49.
13 Office expenses	139,082.	133,417.	2,680.	2,985.
14 Information technology				
15 Royalties				
16 Occupancy	258,869.	215,146.	43,723.	
17 Travel	27,590.	26,536.	1,017.	37.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	43,383.	38,273.	4,090.	1,020.
20 Interest	139,266.	122,554.	13,927.	2,785.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	171,530.	150,946.	17,153.	3,431.
23 Insurance	53,923.	40,909.	13,014.	
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 ARTIST'S FEES	403,140.	402,444.	696.	
b PRODUCTION	182,140.	182,140.		
c MISCELLANEOUS	41,149.	28,954.	8,343.	3,852.
d EQUIPMENT RENTAL & MAIN	39,771.	28,848.	9,976.	947.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	4,472,392.	3,723,073.	536,706.	212,613.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,751.	1	1,555.
	2 Savings and temporary cash investments	1,450,702.	2	1,185,095.
	3 Pledges and grants receivable, net	2,923,903.	3	3,210,567.
	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	51,590.	9	173,497.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,117,104.		
	b Less: accumulated depreciation	10b 2,131,917.		
		7,842,595.	10c	7,985,187.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 33)	12,270,541.	16	12,555,901.	
Liabilities	17 Accounts payable and accrued expenses	386,636.	17	538,159.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	832,421.	23	823,161.
	24 Unsecured notes and loans payable to unrelated third parties	1,550,001.	24	1,750,001.
	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	544,040.	25	231,278.
	26 Total liabilities. Add lines 17 through 25	3,313,098.	26	3,342,599.
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	4,578,003.	27	8,071,902.
	28 Net assets with donor restrictions	4,379,440.	28	1,141,400.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	8,957,443.	32	9,213,302.
33 Total liabilities and net assets/fund balances	12,270,541.	33	12,555,901.	

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Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,728,251.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,472,392.
3	Revenue less expenses. Subtract line 2 from line 1	3	255,859.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,957,443.
5	Net unrealized gains (losses) on investments	5	
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	9,213,302.

Part XII Financial Statements and ReportingCheck 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	2a	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	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

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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.")	3,569,687.	3,225,821.	4,137,612.	6,928,934.	4,572,177.	22,434,231.
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	3,569,687.	3,225,821.	4,137,612.	6,928,934.	4,572,177.	22,434,231.
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)						272,386.
6 Public support. Subtract line 5 from line 4.						22,161,845.

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	3,569,687.	3,225,821.	4,137,612.	6,928,934.	4,572,177.	22,434,231.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	30,320.	25,576.	23,646.	15,519.	6,813.	101,874.
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.)	1,318.	4,545.	7,656.	8,640.	7,101.	29,260.
11 Total support. Add lines 7 through 10						22,565,365.

12 Gross receipts from related activities, etc. (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	98.21	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	95.92	%

- 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 ☒
- 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 ☐
- 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 ☐
- 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 ☐
- 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 ☐

Schedule A (Form 990 or 990-EZ) 2019

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? 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.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
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)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.		
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)? 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.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).		
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? If "Yes," provide detail in Part VI .		
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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
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))? If "Yes," provide detail in Part VI .		
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? If "Yes," provide detail in Part VI .		
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? If "Yes," provide detail in Part VI .		
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)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

- 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.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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.

	Yes	No
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 ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ 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.

- 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.

	Yes	No
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).		

Schedule A (Form 990 or 990-EZ) 2019

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

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

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

Schedule A (Form 990 or 990-EZ) 2019

Part VI

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

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

Employer identification number

LOWER MANHATTAN CULTURAL COUNCIL, INC.

23-7348782

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 foundationCheck 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	Employer identification number
LOWER MANHATTAN CULTURAL COUNCIL, INC.	23-7348782

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	NYC DEPARTMENT OF CULTURAL AFFAIRS 31 CHAMBERS STREET NEW YORK, NY 10007	\$ 1,681,540.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	NEW YORK STATE COUNCIL ON THE ARTS 175 VARICK STREET, 3RD FLOOR NEW YORK, NY 10014	\$ 459,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	UPPER MANHATTEN EMPOWERMENT ZONE 55 W 125TH ST NEW YORK, NY 10027	\$ 885,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	CHARINA FOUNDATION, INC 77 WATER ST. 9TH FL NEW YORK, NY 10005	\$ 157,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	FRANCIS GREENBURGER 107 WAVERLY PLACE NEW YORK, NY 10011	\$ 205,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	ARTSY INC 401 BROADWAY 26TH FL NEW YORK, NY 10013	\$ 203,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

LOWER MANHATTAN CULTURAL COUNCIL, INC.

23-7348782

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
7	AMERICAN EXPRESS 200 VESEY STREET NEW YORK, NY 10285	\$ 115,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	NEW YORK COMMUNITY TRUST 909 3RD AVE STE 22 NEW YORK, NY 10022	\$ 100,000.	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.)
		\$	Person <input 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.)
		\$	Person <input 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.)

Employer identification number

23-7348782

Part II

[illegible]

Name of organization LOWER MANHATTAN CULTURAL COUNCIL, INC.	Employer identification number 23-7348782
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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

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

LOWER MANHATTAN CULTURAL COUNCIL, INC.

Employer identification number
23-7348782**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X

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

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

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2019

932051 10-02-19

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

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

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ 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:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, 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	5,379,440.	2,594,780.	2,094,330.	2,647,561.	2,945,164.
b Contributions	755,500.	2,831,960.	703,000.	310,490.	398,867.
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs	3,993,540.	47,300.	202,550.	863,721.	696,470.
f Administrative expenses					
g End of year balance	2,141,400.	5,379,440.	2,594,780.	2,094,330.	2,647,561.

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

a Board designated or quasi-endowment ☐ 46.70 %

b Permanent endowment ☐ 53.30 %

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:

(i) Unrelated organizations

(ii) Related organizations

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

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		4,316,274.	1,691,223.	2,625,051.
c Leasehold improvements		5,239,519.		5,239,519.
d Equipment		453,808.	440,694.	13,114.
e Other		107,503.		107,503.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,985,187.

Schedule D (Form 990) 2019

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) SBA PPP LOAN	231,278.
(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 ☐

Schedule D (Form 990) 2019

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	6,037,368.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	1,184,811.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	124,306.	
e	Add lines 2a through 2d	2e		1,309,117.
3	Subtract line 2e from line 1	3		4,728,251.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		4,728,251.

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	5,781,509.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	1,184,811.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	124,306.	
e	Add lines 2a through 2d	2e		1,309,117.
3	Subtract line 2e from line 1	3		4,472,392.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		4,472,392.

Part XIII Supplemental Information.

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

PART V, LINE 4:

BOARD DESIGNATED FUNDS CONSIST OF FUNDS THAT WILL BE USED AT THE

DISCRETION OF THE COUNCIL'S BOARD OF DIRECTORS.

TEMPORARY RESTRICTED FUNDS REPRESENT EXPENDABLE GRANTS AND CONTRIBUTIONS

RECEIVED WHICH ARE RESTRICTED BY THE DONOR OR ARE MULTI-YEAR GRANTS THAT

RELATE TO FUTURE PERIODS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

GROSS-UP OF DIRECT FUNDRAISING

124,306.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

Part XIII Supplemental Information *(continued)*

DIRECT FUNDRAISING EXPENSES

124,306.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		SPRING BENEFIT		NONE	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	582,966.			582,966.
	2 Less: Contributions	376,000.			376,000.
	3 Gross income (line 1 minus line 2)	206,966.			206,966.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	124,306.			124,306.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				124,306.
	11 Net income summary. Subtract line 10 from line 3, column (d)				82,660.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

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

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

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

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

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

Schedule G (Form 990 or 990-EZ)		BOWER MANUFACTURING	
Part IV	Supplemental Information (continued)		

[illegible]

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

LOWER MANHATTAN CULTURAL COUNCIL, INC.

Employer identification number
23-7348782

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 non-cash assistance	(h) Purpose of grant or assistance
DANCES FOR A VARIABLE POPULATION 560 RIVERSIDE DRIVE, SUITE #9K NEW YORK, NY 10027	26-4572204	501(C)(3)	10,000.	0.			ARTS PROJECT
HARLEM PRESENTS, INC. 418 WEST 150TH STREET NEW YORK, NY 10031	80-0783830	501(C)(3)	10,000.	0.			ARTS PROJECT
NYC KIDSFEEST 61 LENOX AVENUE, APT. #5A NEW YORK, NY 10026	26-3538262	501(C)(3)	10,000.	0.			ARTS PROJECT
THE HARLEM CHAMBER PLAYERS, INC. 191 CLAREMONT AVENUE, APT. #25 NEW YORK, NY 10027	45-2160781	501(C)(3)	10,000.	0.			ARTS PROJECT
PERFORMANCE ZONE DBA THE FIELD 75 MAIDEN LANE, SUITE #906 NEW YORK, NY 10038	13-3357408	501(C)(3)	9,600.	0.			ARTS PROJECT
SEVEN STORIES INSTITUTE C/O VERONICA LIU - 870 RIVERSIDE DRIVE APT 3C - NEW YORK, NY 10032	38-3713884	501(C)(3)	9,600.	0.			ARTS PROJECT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **100.**

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

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

Schedule I (Form 990) (2019)

Part 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
WHILE WE ARE STILL HERE 555 EDGEcombe AVENUE, SUITE #8B NEW YORK, NY 10032	47-3980592	501(C)(3)	9,600.	0.			ARTS PROJECT
CENTER FOR TRADITIONAL MUSIC AND DANCE - 32 BROADWAY, SUITE #1314 - NEW YORK, NY 10004	23-7379877	501(C)(3)	9,550.	0.			ARTS PROJECT
AFRICAN DIASPORA FILM FESTIVAL, INC. - 535 CATHEDRAL PARKWAY, SUITE #14B - NEW YORK, NY 10025	74-3058513	501(C)(3)	9,100.	0.			ARTS PROJECT
HARLEM NEEDLE ARTS, INC. 2160 MADISON AVENUE, APT. #11C NEW YORK, NY 10037	20-3505872	501(C)(3)	9,100.	0.			ARTS PROJECT
THE JAZZ DRAMA PROGRAM 5030 BROADWAY, SUITE #657 NEW YORK, NY 10034	06-1722131	501(C)(3)	8,900.	0.			ARTS PROJECT
COOPDANZA, INC CO: YVONNE WAKIM DENNIS COODANZA, INC 202 WEST 107TH STREET, APT. #5W -	27-2187668	501(C)(3)	8,800.	0.			ARTS PROJECT
THE GATEKEEPERS COLLECTIVE, INC. 730 RIVERSIDE DRIVE, APT. #9E NEW YORK, NY 10031	47-3674766	501(C)(3)	8,800.	0.			ARTS PROJECT
URBAN PLAYGROUND CHAMBER ORCHESTRA COMPANY - 233 EAST 69TH STREET, APT. #9N - NEW YORK, NY 10021	47-3104856	501(C)(3)	8,800.	0.			ARTS PROJECT
NEW YORK SCANDIA SYMPHONY 824 WEST 176TH STREET, APT. #5C NEW YORK, NY 10033	13-3574230	501(C)(3)	8,800.	0.			ARTS PROJECT

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
BALLET AND BEYOND NYC 309 WEST 75TH STREET, APT. #5 NEW YORK, NY 10023	81-1705519	501(C)(3)	8,700.	0.			ARTS PROJECT
SCULPTORS ALLIANCE, INC. 137 EAST 36TH STREET, SUITE #2B NEW YORK, NY 10016	74-3106862	501(C)(3)	8,700.	0.			ARTS PROJECT
JAZZ WAHI, INC. 200 CABRINI BOULEVARD, APT. #93 NEW YORK, NY 10033	84-2177708	501(C)(3)	8,400.	0.			ARTS PROJECT
DANCE 2000: THE FELICE LESSER DANCE THEATER FOUNDATION, INC. 484 WEST 43RD STREET, SUITE #9T NEW YORK, NY 10036	51-0180509	501(C)(3)	8,100.	0.			ARTS PROJECT
PONY BOX DANCE THEATRE PO BOX 3514 NEW YORK, NY 10008	32-0389505	501(C)(3)	8,100.	0.			ARTS PROJECT
PERFORMANCE ZONE DBA THE FIELD 75 MAIDEN LANE, SUITE #906 NEW YORK, NY 10038	13-3357408	501(C)(3)	8,100.	0.			ARTS PROJECT
THE GATEKEEPERS COLLECTIVE, INC. 730 RIVERSIDE DRIVE, SUITE #9E NEW YORK, NY 10031	47-3674766	501(C)(3)	8,100.	0.			ARTS PROJECT
JUDSON MEMORIAL CHURCH 55 WASHINGTON SQ. PARK SOUTH NEW YORK, NY 10012	13-2664489	501(C)(3)	8,000.	0.			ARTS PROJECT
MANHATTAN THEATRE SOURCE 119 PAYSON AVENUE, APT. #6B NEW YORK, NY 10034	13-4096616	501(C)(3)	7,900.	0.			ARTS PROJECT

Schedule I (Form 990)

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
CENTRO CIVICO CULTURAL DOMINICANO 619 WEST 145TH STREET, SUITE #201 NEW YORK, NY 10031	13-4027383	501(C)(3)	7,800.	0.			ARTS PROJECT
THE LATIN AMERICAN WORKSHOP AKA EL TALLER LATINO AMERICANO - 215 EAST 99 STREET, LOWER LEVEL - NEW YORK, NY 10029	13-2995536	501(C)(3)	7,800.	0.			ARTS PROJECT
THINKDANCE, INC. 235 WEST 102TH STREET, APT. #14T NEW YORK, NY 10025	26-0426410	501(C)(3)	7,700.	0.			ARTS PROJECT
THE ARCTIC CYCLE 900 WEST 190TH STREET, #1N NEW YORK, NY 10040	46-3408963	501(C)(3)	7,700.	0.			ARTS PROJECT
ARTCRAWL HARLEM, INC. 363 LENOX AVENUE, APT. #3A NEW YORK, NY 10027	61-1642840	501(C)(3)	7,600.	0.			ARTS PROJECT
PERFORMANCE ZONE DBA THE FIELD 75 MAIDEN LANE, SUITE #906 NEW YORK, NY 10038	13-3357408	501(C)(3)	7,600.	0.			ARTS PROJECT
UNIQUE PROJECTS INC. 75 BROAD STREET, SUITE #304 NEW YORK, NY 10004	13-3085289	501(C)(3)	7,600.	0.			ARTS PROJECT
COMPOSERS NOW THE YARD, 33 WEST 60TH STREET - NEW YORK, NY 10023	81-2244711	501(C)(3)	7,500.	0.			ARTS PROJECT
EARTH CELEBRATIONS, INC. 638 EAST 6TH STREET NEW YORK, NY 10009	13-3697941	501(C)(3)	7,500.	0.			ARTS PROJECT

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
EASTERN AMERICAN FUZHOU ASSOCIATE, INC. - 15 MONROE STREET - NEW YORK, NY 10002	26-3402152	501(C)(3)	7,500.	0.			ARTS PROJECT
ICEBERG NEW MUSIC, INC. 153 SEAMAN AVENUE, SUITE #5D NEW YORK, NY 10034	82-1643274	501(C)(3)	7,500.	0.			ARTS PROJECT
JAZZ WAHI, INC. 200 CABRINI BOULEVARD, APT #93 NEW YORK, NY 10033	84-2177708	501(C)(3)	7,500.	0.			ARTS PROJECT
NY BARD WO ASSOCIATION 2080 77TH STREET, APT #C8 BROOKLYN, NY 11214	13-4167923	501(C)(3)	7,500.	0.			ARTS PROJECT
AUTISM COMMUNITY THEATRE 316 WEST 112TH STREET, APT. #5E NEW YORK, NY 10026	81-4420303	501(C)(3)	7,500.	0.			ARTS PROJECT
NEW CHAMBER BALLET 304 WEST 56TH STREET, APT. #1A NEW YORK, NY 10019	82-2750241	501(C)(3)	7,400.	0.			ARTS PROJECT
EAST WINDS, INC. 55 PARK TERRACE E, APT. #B63 NEW YORK, NY 10034	13-4078840	501(C)(3)	7,300.	0.			ARTS PROJECT
FRACTURED ATLAS, INC. P.O. BOX 55 HARTSDALE, NY 10530-0055	11-3451703	501(C)(3)	7,300.	0.			ARTS PROJECT
MAKAM NEW YORK, INC. 1800 7TH AVENUE, APT. #6D NEW YORK, NY 10026	45-2708704	501(C)(3)	7,300.	0.			ARTS PROJECT

Schedule I (Form 990)

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	
LATINO FILM MARKET INC. PO BOX 322002 NEW YORK, NY 10032	82-4925064	501(C)(3)	7,250.	0.			ARTS PROJECT	
MS OPERA PRODUCTIONS, INC. 185 PARK ROW, SUITE #5C NEW YORK, NY 10038	27-2065600	501(C)(3)	7,200.	0.			ARTS PROJECT	
DYCKMAN FARMHOUSE MUSEUM ALLIANCE 4881 BROADWAY NEW YORK, NY 10034	32-0035632	501(C)(3)	7,200.	0.			ARTS PROJECT	
LA CASA DE LA HERENCIA CULTURAL PUERTORRIQUEA - 215 EAST 99 STREET, SUITE #18.2 - NEW YORK, NY 10029	13-3205023	501(C)(3)	7,200.	0.			ARTS PROJECT	
MARCUS GARVEY PARK ALLIANCE, INC. 17 WEST 121, APT. #3 NEW YORK, NY 10027	20-3296091	501(C)(3)	7,200.	0.			ARTS PROJECT	
PEOPLE'S THEATRE PROJECT 5030 BROADWAY, SUITE #630 NEW YORK, NY 10034	26-4705999	501(C)(3)	7,200.	0.			ARTS PROJECT	
BABYCASTLES STUDIO INC. 145 WEST 14TH STREET, BASEMENT NEW YORK, NY 10011	81-3155264	501(C)(3)	7,100.	0.			ARTS PROJECT	
HARLEM ARTS FOUNDATION 120 WEST 121ST STREET NEW YORK, NY 10027	47-2841871	501(C)(3)	7,100.	0.			ARTS PROJECT	
MAKAM NEW YORK, INC. 1800 7TH AVENUE, APT. #6D NEW YORK, NY 10026	45-2708704	501(C)(3)	7,100.	0.			ARTS PROJECT	

Schedule I (Form 990)

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
MAN CHEE DRAMATIC AND BENEVOLENT ASSOCIATION, INC. - 118-122 BAXTER STREET, UNIT 207 - NEW YORK, NY 10013	13-3672168	501(C)(3)	7,100.	0.			ARTS PROJECT
NEW AMSTERDAM OPERA, INC. 7932 FLAGLER COURT SOUTH WEST PALM BEACH, FL 33405	81-3656705	501(C)(3)	7,100.	0.			ARTS PROJECT
SHE NYC ARTS, INC. 121 WEST 36TH STREET, SUITE #431 NEW YORK, NY 10018	81-4415545	501(C)(3)	7,100.	0.			ARTS PROJECT
WASHINGTON HEIGHTS CHAMBER ORCHESTRA - 500 FORT WASHINGTON AVENUE, SUITE #C53 - NEW YORK, NY 10033	47-4902761	501(C)(3)	7,100.	0.			ARTS PROJECT
FRACTURED ATLAS, INC. P.O. BOX 55 HARTSDALE, NY 10530-0055	11-3451703	501(C)(3)	7,100.	0.			ARTS PROJECT
DEARMA ROAD PRODUCTIONS, INC. 123 FOURTH AVENUE, SECOND FLOOR NEW YORK, NY 10003	03-0422472	501(C)(3)	7,000.	0.			ARTS PROJECT
LOS PLENEROS DE LA 21 1680 LEXINGTON AVENUE, ROOM #209 NEW YORK, NY 10029	13-3353110	501(C)(3)	7,000.	0.			ARTS PROJECT
ARTCRAWL HARLEM, INC 363 LENOX AVENUE, APT. #3A NEW YORK, NY 10027	61-1642840	501(C)(3)	6,900.	0.			ARTS PROJECT
NEW WOMEN NEW YORKERS, INC. 601 WEST 26TH STREET, SUITE 325#99 NEW YORK, NY 10001	47-1784843	501(C)(3)	6,900.	0.			ARTS PROJECT

Schedule I (Form 990)

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) IFC 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
UNIQUE PROJECTS INC. 75 BROAD STREET, SUITE #304 NEW YORK, NY 10004	13-3085289	501(C)(3)	6,900.	0.			ARTS PROJECT
FRACTURED ATLAS, INC. P.O. BOX 55 HARTSDALE, NY 10530-0055	11-3451703	501(C)(3)	6,800.	0.			ARTS PROJECT
NEW AMSTERDAM MUSICAL ASSOCIATION 107 WEST 130TH STREET NEW YORK, NY 10027	52-2333917	501(C)(3)	6,800.	0.			ARTS PROJECT
WASHINGTON HEIGHTS CHAMBER ORCHESTRA - 500 FORT WASHINGTON AVENUE, APT. #C53 - NEW YORK, NY 10033	47-4902761	501(C)(3)	6,800.	0.			ARTS PROJECT
AMERICA-ISRAEL CULTURAL FOUNDATION, INC - 322 EIGHTH AVENUE, SUITE #1702 - NEW YORK, NY 10001	13-1664048	501(C)(3)	6,700.	0.			ARTS PROJECT
FRACTURED ATLAS, INC. P.O. BOX 55 HARTSDALE, NY 10530-0055	11-3451703	501(C)(3)	6,600.	0.			ARTS PROJECT
FRACTURED ATLAS, INC. P.O. BOX 55 HARTSDALE, NY 10530-0055	11-3451703	501(C)(3)	6,600.	0.			ARTS PROJECT
PERFORMANCE ZONE DBA THE FIELD 75 MAIDEN LANE, SUITE #906 NEW YORK, NY 10038	13-3357408	501(C)(3)	6,600.	0.			ARTS PROJECT
ARTS AT TENRI CULTURAL INSTITUTE 43A WEST 13TH STREET NEW YORK, NY 10011	20-3507927	501(C)(3)	6,400.	0.			ARTS PROJECT

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
HARLEM DANCE CLUB, INC. 2816 FREDERICK DOUGLASS BLVD, APT. NEW YORK, NY 10039	82-1630347	501(C)(3)	6,400.	0.			ARTS PROJECT
NATIONAL ASIAN ARTISTS PROJECT 10 WEST 66TH STREET, APT. #23C NEW YORK, NY 10023	26-4641565	501(C)(3)	6,400.	0.			ARTS PROJECT
RHYMES WITH OPERA 45 OVERLOOK TERRACE, APT. #4A NEW YORK, NY 10033	83-2194570	501(C)(3)	6,400.	0.			ARTS PROJECT
SYMPHONY OF THE CITY OF NEW YORK, INC. - 155 EAST 44TH STREET, 6TH FLOOR - NEW YORK, NY 10017	45-4260380	501(C)(3)	6,400.	0.			ARTS PROJECT
THE STONEWALL CHORALE 688 TENTH AVENUE, APT. #4S NEW YORK, NY 10019	13-3244432	501(C)(3)	6,400.	0.			ARTS PROJECT
WORKERS UNITE FILM FESTIVAL, INC. 351 WEST 24TH STREET, SUITE #7F NEW YORK, NY 10011	45-5086213	501(C)(3)	6,400.	0.			ARTS PROJECT
HARLEM ARTS ALLIANCE 229 WEST 135TH STREET NEW YORK, NY 10030	47-0873119	501(C)(3)	6,400.	0.			ARTS PROJECT
MICHIYAYA DANCE COMPANY, INC. 212 WEST 14TH STREET, APT. #3A NEW YORK, NY 10011	82-2752540	501(C)(3)	6,300.	0.			ARTS PROJECT
THE PLIARDES PROJECT 524 WEST 184TH STREET, APT. #3C NEW YORK, NY 10033	82-3594827	501(C)(3)	6,300.	0.			ARTS PROJECT

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
THE CHILDREN'S INSTITUTE OF FASHION ARTS - 80 HAVEN AVENUE, APT. #3A - NEW YORK, NY 10032	81-3435129	501(C)(3)	6,300.	0.			ARTS PROJECT
YOUNG NEW YORKERS CHORUS 888 8TH AVENUE, APT. #6S NEW YORK, NY 10019	36-4420273	501(C)(3)	6,200.	0.			ARTS PROJECT
CERDORION VOCAL ENSEMBLE 545 WEST 111TH STREET, APT. #8J NEW YORK, NY 10025	13-3925551	501(C)(3)	6,000.	0.			ARTS PROJECT
DANCES BY ISADORA (CATHERINE GALLANT/DANCE) - 1623 THIRD AVENUE, SUITE #21K - NEW YORK, NY 10128	04-3041985	501(C)(3)	6,000.	0.			ARTS PROJECT
SACHIYO ITO AND COMPANY, INC. 405 WEST 23RD STREET, SUITE #4G NEW YORK, NY 10011	13-3062691	501(C)(3)	6,000.	0.			ARTS PROJECT
THE BREWING DEPT., INC. 106 WEST 76TH, APT. #2B NEW YORK, NY 10023	46-3036178	501(C)(3)	6,000.	0.			ARTS PROJECT
TOSOS II, INC. 688 10TH AVENUE, APT. #4N NEW YORK, NY 10019	73-1694535	501(C)(3)	6,000.	0.			ARTS PROJECT
PERFORMANCE ZONE DBA THE FIELD 75 MAIDEN LANE, SUITE #906 NEW YORK, NY 10038	13-3357408	501(C)(3)	6,000.	0.			ARTS PROJECT
FRACTURED ATLAS, INC. P.O. BOX 55 HARTSDALE, NY 10530-0055	11-3451703	501(C)(3)	5,800.	0.			ARTS PROJECT

Schedule I (Form 990)

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
STEFANIE NELSON DANCE GROUP 468 RIVERSIDE DRIVE, APT. #24 NEW YORK, NY 10027	52-2272446	501(C)(3)	5,800.	0.			ARTS PROJECT
THE ART SONG PRESERVATION SOCIETY OF NEW YORK, INC. - 664 WEST 163RD STREET, APT. #6 - NEW YORK, NY 10032	32-0305966	501(C)(3)	5,800.	0.			ARTS PROJECT
SUKKAHWOOD INC. 577 ISHAM STREET, APT. # 2E NEW YORK, NY 10034	82-2630901	501(C)(3)	5,700.	0.			ARTS PROJECT
THE ART SONG PRESERVATION SOCIETY OF NEW YORK, INC. - 664 WEST 163RD STREET, APT. #6 - NEW YORK, NY 10032	32-0305966	501(C)(3)	5,600.	0.			ARTS PROJECT
THE INDIA CENTER 244 FIFTH AVENUE, APT. #2 NEW YORK, NY 10001	20-2752153	501(C)(3)	5,600.	0.			ARTS PROJECT
UP THEATER COMPANY 60 COOPER STREET, APT. #2E NEW YORK, NY 10034	27-3236745	501(C)(3)	5,500.	0.			ARTS PROJECT
LOADBANG INC. 69 BENNETT AVENUE, SUITE #304 NEW YORK, NY 10033	46-1899944	501(C)(3)	5,400.	0.			ARTS PROJECT
LATINO FILM MARKET, INC. PO BOX 322002 NEW YORK, NY 10032	82-4925064	501(C)(3)	5,300.	0.			ARTS PROJECT
NEW YORK POEM ARTS CENTER, INC. 72 COLUMBIA STREET, APT. #21E NEW YORK, NY 10002	46-2969685	501(C)(3)	5,300.	0.			ARTS PROJECT

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ **Attach to Form 990.**

▶ **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

LOWER MANHATTAN CULTURAL COUNCIL, INC.

Employer identification number

23-7348782

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

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

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

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

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

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

Schedule J (Form 990) 2019

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.

[illegible]

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

LOWER MANHATTAN CULTURAL COUNCIL, INC.

Employer identification number
23-7348782

PART I - LINE 1

TO CREATE A FERTILE & NUTURING ENVIRONMENT FOR ARTISTS & ART GROUPS,
ENLIVENING PUBLIC SPACES WITH FREE PROGRAMS IN THE VISUAL, PERFORMING &
NEW MEDIA ARTS, AND TO PROVIDE LEADERSHIP IN CULTURAL PLANNING AND
ADVOCACY.

PART III - LINE 1

LOWER MANHATTAN CULTURAL COUNCIL'S (THE "LMCC") MISSION IS TO CREATE A
FERTILE AND NURTURING ENVIRONMENT FOR ARTISTS AND ART GROUPS,
ENLIVENING PUBLIC SPACES WITH FREE PROGRAMS IN THE VISUAL, PERFORMING
AND NEW MEDIA ARTS, AND TO PROVIDE LEADERSHIP IN CULTURAL PLANNING AND
ADVOCACY.

PART III - LINE 4A

GRANTS AND SERVICES:

COMMUNITY ARTS GRANTS FOR ARTISTS AND ORGANIZATIONS THROUGHOUT THE
BOROUGH OF MANHATTAN (ADMINISTERED IN PARTNERSHIP WITH THE NEW YORK
STATE COUNCIL ON THE ARTS AND NYC'S DEPARTMENT OF CULTURAL AFFAIRS);
DOWNTOWN CULTURAL GRANTS FOR CULTURAL ORGANIZATIONS AND ART PROJECTS IN
LOWER MANHATTAN; FISCAL SPONSORSHIP FOR INDIVIDUAL ARTISTS AND ART
GROUPS THAT NEED NONPROFIT STATUS TO RAISE RESOURCES FOR THEIR
PROJECTS; AND PROFESSIONAL DEVELOPMENT TRAINING TO HELP INDIVIDUAL
ARTISTS PURSUE THEIR PRACTICE AND THEIR CAREER GOALS. PROGRAMS A
VARIETY OF PUBLIC PROGRAMS (SYMPOSIA, CONFERENCES, PUBLIC ART EXHIBITS,
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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

Name of the organization

LOWER MANHATTAN CULTURAL COUNCIL, INC.

Employer identification number

23-7348782

PERFORMANCES, AND FILM SCREENINGS) PRODUCED TO STIMULATE INNOVATIVE ART

AND DIALOGUE ON CONTEMPORARY URBAN ISSUES, AND TO BRING ART TO DOWNTOWN

AUDIENCES. ARTS, AND TO PROVIDE LEADERSHIP IN CULTURAL PLANNING AND

ADVOCACY.

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

THE FINANCE COMMITTEE OF THE BOARD WILL REVIEW THE FORM 990 AND RECOMMEND

TO THE FULL BOARD TO APPROVE OR NOT APPROVE. THE FORM 990 WOULD THEN BE

PROVIDED TO THE ENTIRE BOARD FOR REVIEW AND A VOTE FOR APPROVAL WOULD

THEN BE CONDUCTED.

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

ANY CONFLICTS ARE READ INTO THE MEETING MINUTES OF THE SUBSEQUENT BOARD

MEETING.

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

THE FINANCE DEPARTMENT CONDUCTS RESEARCH ON COMPENSATION LEVELS AT

COMPARABLE ORGANIZATIONS BY REVIEWING FORMS 990 THROUGH GUIDESTAR.ORG, AND

BY VARIOUS NON-PROFIT SALARY SURVEYS RECEIVED BY THE LMCC.

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

THE LMCC MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. SOME OF THE DOCUMENTS CAN ALSO

BE FOUND ON THE LMCC WEBSITE.