Form **990** | **Return of Organization Exempt From Income Tax** | OMB No. 1545-0047 **2006**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 07/01 **, 2006, and ending** 06/30/2007

B Check if applicable: Address change / Name change / Initial return / Final return / Amended return / Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS

Number and street (or P.O. box if mail is not delivered to street address) 188 MADISON AVENUE — Room/suite 5TH FLR

City or town, state or country, and ZIP + 4 NEW YORK, NY 10016

D Employer identification number 13-1887440

E Telephone number (212)592-7403

F Accounting method: Cash [ ] Accrual [X] Other (specify) ▶

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H *and* **I** *are not applicable to section 527 organizations.*

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? [ ] Yes [ ] No (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

I Group Exemption Number ▶

M Check ▶ [ ] if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶ WWW.NYPL.ORG

J Organization type (check only one) ▶ [X] 501(c) (3) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

K Check here ▶ [ ] if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 378,464,919.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

COPY FOR PUBLIC INSPECTION

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	52,621,786.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d	152,744,836.		
	e	**Total** (add lines 1a through 1d) (cash $ 205,366,622. noncash $)			1e	205,366,622.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	5,141,977.
	3	Membership dues and assessments			3	233,319.
	4	Interest on savings and temporary cash investments			4	5,284,854.
	5	Dividends and interest from securities			5	8,051,365.
	6 a	Gross rents	6a	1,796,306.		
	b	Less: rental expenses	6b			
	c	Net rental income or (loss). Subtract line 6b from line 6a			6c	1,796,306.
	7	Other investment income (describe ▶ STMT 11)			7	558,657.

		(A) Securities		(B) Other
8 a	Gross amount from sales of assets other than inventory	120,594,398.	8a	24,063,666.
b	Less: cost or other basis and sales expenses	73,332,568.	8b	11,273,806.
c	Gain or (loss) (attach schedule)	47,261,830.	8c	12,789,860.

Revenue	d	Net gain or (loss). Combine line 8c, columns (A) and (B)			8d	60,051,690.
	9	Special events and activities (attach schedule). If any amount is from **gaming,** check here ▶ [ ]				
	a	Gross revenue (not including $ 5,362,675. of STMT 12 contributions reported on line 1b) STMT 13	9a	226,457.		
	b	Less: direct expenses other than fundraising expenses	9b	224,758.		
	c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c	1,699.
	10 a	Gross sales of inventory, less returns and allowances STMT 14	10a	1,587,737.		
	b	Less: cost of goods sold STMT 15	10b	740,983.		
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	846,754.
	11	Other revenue (from Part VII, line 103)			11	5,559,561.
	12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	292,892,804.
Expenses	13	Program services (from line 44, column (B))			13	224,449,627.
	14	Management and general (from line 44, column (C))			14	27,290,116.
	15	Fundraising (from line 44, column (D))			15	6,825,890.
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses**. Add lines 16 and 44, column (A)			17	258,565,633.
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12			18	34,327,171.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	698,305,500.
	20	Other changes in net assets or fund balances (attach explanation) STMT 16 STMT 17			20	54,802,090.
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21	787,434,761.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2006)

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. *(See the instructions.)*

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash $ ____ noncash $ ____) If this amount includes foreign grants, check here ▶ ☐	22a				
22b Other grants and allocations (attach schedule) (cash $ 900,000. noncash $ ____) If this amount includes foreign grants, check here ▶ ☐	22b	900,000.	900,000.	STMT 18	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a	4,644,851.	731,833.	3,348,979.	564,039.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	105,492.	44,296.	61,196.	
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	110,306,043.	100,498,737.	7,033,163.	2,774,143.
27 Pension plan contributions not included on lines 25a, b, and c	27	10,454,287.	9,478,953.	708,150.	267,184.
28 Employee benefits not included on lines 25a - 27	28	32,561,583.	30,643,758.	1,705,713.	212,112.
29 Payroll taxes	29	6,556,821.	5,772,064.	594,501.	190,256.
30 Professional fundraising fees	30	712,228.			712,228.
31 Accounting fees	31	303,209.	2,025.	301,184.	
32 Legal fees	32	671,143.	49,988.	621,155.	
33 Supplies	33	2,671,971.	2,419,045.	198,968.	53,958.
34 Telephone	34	1,875,980.	1,684,010.	189,501.	2,469.
35 Postage and shipping	35	773,980.	551,059.	93,329.	129,592.
36 Occupancy	36	9,067,360.	9,057,478.	9,882.	
37 Equipment rental and maintenance	37	3,818,072.	3,526,140.	266,194.	25,738.
38 Printing and publications	38	1,421,770.	697,932.	265,690.	458,148.
39 Travel	39	570,919.	448,728.	78,172.	44,019.
40 Conferences, conventions, and meetings	40				
41 Interest	41	3,729,887.	3,408,747.	321,140.	
42 Depreciation, depletion, etc. (attach schedule)	42	10,385,043.	10,385,043.		
43 Other expenses not covered above (itemize): a STMT 21	43a	57,034,994.	44,149,791.	11,493,199.	1,392,004.
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	258,565,633.	224,449,627.	27,290,116.	6,825,890.

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ **Yes** ☒ **No**

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ____ ; **(ii)** the amount allocated to Program services $ ____ ;
(iii) the amount allocated to Management and general $ ____ ; and **(iv)** the amount allocated to Fundraising $ ____

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶EDUCATION AND LIBRARY SERVICES All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a SEE ATTACHED GENERAL EXPLANATION ATTACHMENT THE BRANCH LIBRARIES (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	126,854,079.
b SEE ATTACHED GENERAL EXPLANATION ATTACHMENT THE RESEARCH LIBRARIES (Grants and allocations $ 900,000.) If this amount includes foreign grants, check here ▶ ☐	97,595,548.
c (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
d (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
e Other program services (attach schedule) (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) . . . . ▶	224,449,627.

Form **990** (2006)

Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets					
45	Cash - non-interest-bearing		280,336.	45	286,975.
46	Savings and temporary cash investments		121,529,216.	46	148,778,436.
47a	Accounts receivable	47a 3,705,519.			
b	Less: allowance for doubtful accounts	47b	4,523,699.	47c	3,705,519.
48a	Pledges receivable	48a 26,258,493.			
b	Less: allowance for doubtful accounts	48b	27,044,510.	48c	26,258,493.
49	Grants receivable		26,340,289.	49	13,637,275.
50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a	
b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b	
51a	Other notes and loans receivable (attach schedule)	51a			
b	Less: allowance for doubtful accounts	51b		51c	
52	Inventories for sale or use		208,948.	52	205,499.
53	Prepaid expenses and deferred charges		3,350,167.	53	3,105,249.
54a	Investments - publicly-traded securities STMT 22 ▶	☐ Cost ☒ FMV	574,819,809.	54a	689,597,496.
b	Investments - other securities (attach schedule) ▶	☐ Cost ☒ FMV	54,127,200.	54b	73,475,363.
55a	Investments - land, buildings, and equipment: basis STMT 23	55a 15,521,052.			
b	Less: accumulated depreciation (attach schedule)	55b	15,521,052.	55c	15,521,052.
56	Investments - other (attach schedule) STMT 24		31,634,556.	56	39,820,001.
57a	Land, buildings, and equipment: basis	57a 315,994,298.			
b	Less: accumulated depreciation (attach schedule)	57b 165,215,753.	159,693,885.	57c	150,778,545.
58	Other assets, including program-related investments (describe ▶ STMT 25)		7,852,259.	58	5,957,852.
59	**Total assets** (must equal line 74). Add lines 45 through 58		1,026,925,926.	59	1,171,127,755.
Liabilities					
60	Accounts payable and accrued expenses		40,659,505.	60	39,076,811.
61	Grants payable			61	
62	Deferred revenue		98,913,481.	62	123,019,877.
63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
64a	Tax-exempt bond liabilities (attach schedule) STMT 26		105,510,002.	64a	102,710,002.
b	Mortgages and other notes payable (attach schedule)			64b	
65	Other liabilities (describe ▶ STMT 27)		83,537,438.	65	118,886,304.
66	**Total liabilities.** Add lines 60 through 65		328,620,426.	66	383,692,994.
Net Assets or Fund Balances					
	Organizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.				
67	Unrestricted		103,375,197.	67	120,685,935.
68	Temporarily restricted		253,852,055.	68	296,799,487.
69	Permanently restricted		341,078,248.	69	369,949,339.
	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.				
70	Capital stock, trust principal, or current funds			70	
71	Paid-in or capital surplus, or land, building, and equipment fund			71	
72	Retained earnings, endowment, accumulated income, or other funds			72	
73	**Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)		698,305,500.	73	787,434,761.
74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73		1,026,925,926.	74	1,171,127,755.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	429,402,082.
b	Amounts included on line a but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	83,638,600.		
2	Donated services and use of facilities	b2	58,353,700.		
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	141,992,300.
c	Subtract line **b** from line **a**			c	287,409,782.
d	Amounts included on Part I, line 12, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1	5,483,022.		
2	Other (specify):	d2			
	Add lines **d1** and **d2**			d	5,483,022.
e	**Total revenue** (Part I, line 12). Add lines **c** and **d** ▶			e	292,892,804.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	311,436,311.
b	Amounts included on line a but not on Part I, line 17:				
1	Donated services and use of facilities	b1	58,353,700.		
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	58,353,700.
c	Subtract line **b** from line **a**			c	253,082,611.
d	Amounts included on Part I, line 17, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1	5,483,022.		
2	Other (specify):	d2			
	Add lines **d1** and **d2**			d	5,483,022.
e	**Total expenses** (Part I, line 17). Add lines **c** and **d** ▶			e	258,565,633.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(If not paid, enter -0-.)**	**(D)** Contributions to employee benefit plans & deferred compensation plans	**(E)** Expense account and other allowances
SEE STATEMENT 28		4,047,984.	539,951.	NONE

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 48			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) STMT 36	75b	X	
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶	75c		X
	If "Yes," attach a statement that includes the information described in the instructions.			
d	Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	**(B)** Loans and Advances	**(C)** Compensation (if not paid, enter -0-)	**(D)** Contributions to employee benefit plans & deferred compensation plans	**(E)** Expense account and other allowances
SEE STATEMENT 37	NONE	NONE	105,492.	NONE

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b	If "Yes," enter the name of the organization ▶ STMT 39 and check whether it is [X] exempt **or** [ ] nonexempt			
81a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a NONE			
b	Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information *(continued)*

			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b: 58,353,700.			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	N/A	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c: N/A			
d	Section 162(e) lobbying and political expenditures 85d: N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e: N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f: N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	*501(c)(7) orgs.* Enter: **a** Initiation fees and capital contributions included on line 12 86a: N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b: N/A			
87	*501(c)(12) orgs.* Enter: **a** Gross income from members or shareholders 87a: N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b: N/A			
88 b	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶	88b		X
89 a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ NONE ; section 4912 ▶ NONE ; section 4955 ▶ NONE			
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ NONE			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ NONE			
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X
f	*All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	N/A	

90 a List the states with which a copy of this return is filed ▶ SEE STATEMENT 40

b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 90b 3090

91 a The books are in care of ▶ ASST VP FOR FIN & CONTROLLER Telephone no. ▶ 212-592-7403

Located at ▶ 188 MADISON AVENUE NEW YORK, NY ZIP + 4 ▶ 10016

			Yes	No
b	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)?	91b		X
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

Part VI Other Information *(continued)*

		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		X
If "Yes," enter the name of the foreign country ▶			

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041 -** Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a FINES AND FEES					3,566,993.
b PHOTOCOPY, MICROFILM					937,552.
c INFORMATION SVCS					637,432.
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					233,319.
95 Interest on savings and temporary cash investments			14	5,284,854.	
96 Dividends and interest from securities			14	8,051,365.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	1,796,306.	
98 Net rental income or (loss) from personal property					
99 Other investment income			18	558,657.	
100 Gain or (loss) from sales of assets other than inventory	531390	1,438,872.	18	58,612,818.	1,699.
101 Net income or (loss) from special events					846,754.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a STMT 41		622,168.		3,374,779.	1,562,614.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		2,061,040.		77,678,779.	7,786,363.

105 Total (add line 104, columns (B), (D), and (E)) ▶ 87,526,182.

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	SEE GENERAL EXPLANATION ATTACHMENT

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ **Yes** ☒ **No**

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **Yes** ☒ **No**

Note: *If "Yes" to* ***(b),*** *file Form 8870* ***and*** *Form 4720 (see instructions).*

Part XI **Information Regarding Transfers To and From Controlled Entities.** *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	N/A	

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	N/A	

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	N/A	

Please Sign Here

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.

▶ Signature of officer Date

▶ SHARON HEWITT WATKINS
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ [signature]	Date 3/20/08	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen. Inst. X)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ ERNST & YOUNG U.S. LLP		EIN ▶ 34-6565596	
5 TIMES SQUARE		Phone no. ▶ 212-773-3000	
NEW YORK, NY 10036			

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2006

Name of the organization: NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS

Employer identification number 13-1887440

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	**(b)** Title and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans & deferred compensation	**(e)** Expense account and other allowances
SEE STATEMENT 42				
Total number of other employees paid over $50,000 . . ▶	560			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	**(b)** Type of service	**(c)** Compensation
SEE STATEMENT 43		
Total number of others receiving over $50,000 for professional services . . . . ▶ 66		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	**(b)** Type of service	**(c)** Compensation
SEE STATEMENT 44		
Total number of other contractors receiving over $50,000 for other services . . . . ▶ 51		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. **Schedule A (Form 990 or 990-EZ) 2006**

JSA
6E1210 2.000

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ 83,089. (Must equal amounts on line 38, Part VI-A, or line **i** of Part VI-B.)	1	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? STMT 45	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) STMT 46	3a	X	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		X
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X
d	Enter the total number or donor advised funds owned at the end of the tax year ▶			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such funds or accounts ▶			NONE
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶			NONE

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 [ ] A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 [ ] A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 [ ] A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 [ ] A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 [ ] A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ ______________________

10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11 a [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11 b [ ] A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 [ ] An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)

13 [ ] An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:

[ ] Type I [ ] Type II [ ] Type III - Functionally Integrated [ ] Type III - Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	**(b)** Employer identification number (EIN)	**(c)** Type of organization (described in lines 5 through 12 above or IRC section)	**(d)** Is the supported organization listed in the supporting organization's governing documents? Yes	No	**(e)** Amount of support
Total ▶					

14 [ ] An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	56,806,212.	53,945,281.	50,749,399.	39,222,000.	200722892.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	28,321,275.	42,911,815.	15,520,170.	7,540,108.	94,293,368.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	8,737,652.	9,570,789.	8,977,141.	10,855,008.	38,140,590.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	160123376.	162983531.	143062577.	157072000.	623241484.
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	57,016,000.	53,213,000.	52,119,000.	49,375,000.	211723000.
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	311004515.	322624416.	270428287.	264064116.	1168121334.
24 Line 23 minus line 17	282683240.	279712601.	254908117.	256524008.	1073827966.
25 Enter 1% of line 23	3,110,045.	3,226,244.	2,704,283.	2,640,641.	

26 Organizations described on lines 10 or 11: **a** Enter 2% of amount in column (e), line 24 ▶ **26a** 21,476,559.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b** NONE

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ **26c** 1073827966.

d Add: Amounts from column (e) for lines: 18 38,140,590. 19 ______ 22 ______ 26b NONE ▶ **26d** 38,140,590.

e Public support (line 26c minus line 26d total) ▶ **26e** 1035687376.

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ **26f** 96.4482 %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

NOT APPLICABLE

(2005) ______ (2004) ______ (2003) ______ (2002) ______

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2),** enter the sum of these differences (the excess amounts) for each year:

(2005) ______ (2004) ______ (2003) ______ (2002) ______

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ **27c**

d Add: Line 27a total ______ and line 27b total ______ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e**

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ **27f**

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ **27g** %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ **27h** %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See page 9 of the instructions.) NOT APPLICABLE
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Line	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) NOT APPLICABLE

Check ▶ a [ ] if the organization belongs to an affiliated group. Check ▶ b [ ] if you checked **"a"** and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for **all** electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
Not over $500,000 / 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 / $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 / $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 / $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 / $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2006	**(b)** 2005	**(c)** 2004	**(d)** 2003	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers	X		
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)	X		
c Media advertisements		X	
d Mailings to members, legislators, or the public	X		20,772.
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body	X		62,317.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines **c** through **h**.)			83,089.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities. STMT 47

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	**51a(i)**		X
(ii) Other assets	**a(ii)**		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	**b(i)**		X
(ii) Purchases of assets from a noncharitable exempt organization	**b(ii)**		X
(iii) Rental of facilities, equipment, or other assets	**b(iii)**		X
(iv) Reimbursement arrangements	**b(iv)**		X
(v) Loans or loan guarantees	**b(v)**		X
(vi) Performance of services or membership or fundraising solicitations	**b(vi)**		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	**c**		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ **Yes** ☒ **No**

b If "Yes," complete the following schedule:

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship
N/A		

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2006

Name of organization	Employer identification number
NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS	13-1887440

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.** (**Note:** *Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule - see instructions.)*

General Rule -

[ ] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules -

[X] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

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

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.) . . . . ► $ ____________

Caution: *Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they* ***must*** *check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).*

Name of organization: NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS

Employer identification number: 13-1887440

Part I **Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		127,227,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2		22,724,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
3		6,199,246.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
4		4,785,263.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
			Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
			Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

FORM 990 - GENERAL EXPLANATION ATTACHMENT
===

FORM 990, PART III

FOUR RESEARCH CENTERS AND 87 BRANCH LIBRARIES, LOCATED IN THE BOROUGHS OF THE BRONX, MANHATTAN, AND STATEN ISLAND, COMPRISE THE NEW YORK PUBLIC LIBRARY. THE LIBRARY IS THE ONLY INSTITUTION OF ITS KIND, WITH BOTH WORLD-CLASS RESEARCH AND CIRCULATING COLLECTIONS THAT ARE FREE AND OPEN TO THE GENERAL PUBLIC. AS ONE OF THE CORNERSTONES OF THE AMERICAN TRADITION OF EQUAL OPPORTUNITY, THE NEW YORK PUBLIC LIBRARY PROVIDES FREE AND OPEN ACCESS TO THE ACCUMULATED WISDOM OF THE WORLD, WITHOUT DISTINCTION AS TO INCOME, RELIGION, NATIONALITY, OR OTHER HUMAN CONDITION. IT GUARANTEES FREEDOM OF INFORMATION AND INDEPENDENCE OF THOUGHT. THE MISSION OF THE NEW YORK PUBLIC LIBRARY IS TO USE ITS AVAILABLE RESOURCES IN A BALANCED PROGRAM OF COLLECTING, CATALOGING, AND CONSERVING BOOKS AND OTHER MATERIALS, AND PROVIDING READY ACCESS DIRECTLY TO INDIVIDUAL LIBRARY USERS AND TO USERS ELSEWHERE THROUGH COOPERATING LIBRARIES AND LIBRARY NETWORKS.

DURING FISCAL 2007, THERE WERE 25.5 MILLION ELECTRONIC VISITS TO THE LIBRARY'S WEBSITE AND 237 COUNTRIES ACCESSED IT. THERE WERE 2,583 COMPUTERS AND 456 ELECTRONIC DATABASES AVAILABLE FOR PUBLIC USE.

THE BRANCH LIBRARIES (PART IIIA) THE SERVICES OF THE BRANCH LIBRARIES EXTEND FAR BEYOND THE TRADITIONAL LENDING ROLE USUALLY ASSOCIATED WITH NEIGHBORHOOD LIBRARIES, TO PROVIDE VITAL OUTREACH SERVICES AND PROGRAMS TO SCHOOLS, NURSING HOMES, HOSPITALS, SHELTERS AND PRISONS, AND TO THE BLIND AND PHYSICALLY HANDICAPPED, INCLUDING BOOK-BY-MAIL DELIVERIES TO THE HOMEBOUND. IN FISCAL 2007, THERE WERE 14.5 MILLION VISITS TO THE BRANCH LIBRARIES BY INDIVIDUALS WHO BORROWED 16.6 MILLION ITEMS. THE BRANCH LIBRARIES SPONSORED 25,922 PROGRAMS, ATTENDED BY 550,000 ADULTS AND CHILDREN. COLLECTIONS INCLUDE 4.4 MILLION BOOKS AND 2.9 MILLION NONPRINT ITEMS SUCH AS FILMS, VIDEOTAPES, PICTURES, AUDIO RECORDINGS AND MATERIALS FOR THE BLIND. REFERENCE INQUIRIES TOTALED 7.9 MILLION AND DIRECTIONAL INQUIRIES WERE APPROXIMATELY 7.8 MILLION.

THE RESEARCH LIBRARIES (PART IIIB) DURING FISCAL 2007, THE FOUR RESEARCH CENTERS - THE HUMANITIES AND SOCIAL SCIENCES LIBRARY; THE SCIENCE, INDUSTRY AND BUSINESS LIBRARY; THE SCHOMBURG CENTER FOR RESEARCH IN BLACK CULTURE; AND THE LIBRARY FOR THE PERFORMING ARTS - HAD 1.8 MILLION ON-SITE USERS. LIBRARY STAFF RESPONDED TO 616,000 REFERENCE INQUIRIES. OF 44.0 MILLION COLLECTION ITEMS, APPROXIMATELY 16.0 MILLION ARE BOOKS AND BOOK-LIKE MATERIALS, AND THE REMAINDER CONSISTS OF ITEMS SUCH AS AUDIO RECORDINGS, FILMS, MAPS, SHEET MUSIC, PRINTS, AND CLIPPINGS. THE RESEARCH LIBRARIES HAVE AN EXTENSIVE CONSERVATION AND PRESERVATION PROGRAM: THROUGH RESTORATION, PRESERVATION, MICROFILMING AND REPRINT,

FORM 990 - GENERAL EXPLANATION ATTACHMENT (CONT'D)

162,000 ITEMS WERE PRESERVED. IN ADDITION, ABOUT 1,100 HOURS OF VIDEO TAPE MEDIA, 253 HOURS OF RECORDED SOUND MEDIA, AND 6,000 FEET OF MOTION PICTURE FILM WERE PRESERVED. AS PART OF THE LIBRARY'S RICH PUBLIC EDUCATION PROGRAM, 31 MAJOR EXHIBITIONS WERE MOUNTED AT THE FOUR LIBRARIES, AND A NUMBER OF SMALLER DISPLAYS WERE ON VIEW ALL YEAR. EMINENT SCIENTISTS, SCHOLARS AND WRITERS PARTICIPATED IN LECTURES, PANEL DISCUSSIONS, AND RECITALS, FURTHERING THE LIBRARY'S EFFORTS TO MAKE AVAILABLE TO THE PUBLIC A SERIES OF EDUCATIONAL AND CULTURAL PROGRAMS OF THE HIGHEST QUALITY.

FORM 990 - GENERAL EXPLANATION ATTACHMENT
===

FORM 990, PART IV, LINES 55A & 55B

REAL ESTATE INVESTMENTS

COST/OTHER BASIS: 15,521,052
ACCUM DEPRECIATION: 0
BOOK VALUE: 15,521,052

FORM 990 - GENERAL EXPLANATION ATTACHMENT

FORM 990, PART IV, LINES 57A & 57B

LAND AC 1910
COST/OTHER BASIS: 3,308,414
ACCUM DEPRECIATION: 0
BOOK VALUE: 3,308,414

BUILDING AC 1920 & 1970
COST/OTHER BASIS: 78,169,206
ACCUM DEPRECIATION: 14,521,898
BOOK VALUE: 63,647,308

BUILDING IMPROVEMENTS AC 1930/31/50 & 1971/75
COST/OTHER BASIS: 210,243,035
ACCUM DEPRECIATION: 129,411,543
BOOK VALUE: 80,831,492

IMPROVEMENT AC 1940/50 & 1980/85
COST/OTHER BASIS: 24,273,643
ACCUM DEPRECIATION: 21,282,312
BOOK VALUE: 2,991,331

TOTAL COST/OTHER BASIS: 315,994,298
ACCUM DEPRECIATION: 165,215,753
BOOK VALUE: 150,778,545

STATEMENT 4

FORM 990 - GENERAL EXPLANATION ATTACHMENT

FORM 990, PART IV, LINE 58

OTHER ASSETS: ASSETS RESTRICTED AS TO USE PRIMARILY CONSIST OF AMOUNTS RESTRICTED FOR FUTURE CONSTRUCTION, DEBT SERVICE AND OTHER DEBT-RELATED MATTERS AND ARE INVESTED IN U.S. TREASURY NOTES AND INVESTMENT GRADE OBLIGATIONS THAT ARE CARRIED AT QUOTED MARKET VALUE WHICH APPROXIMATES COST.

END OF YEAR: 5,957,852

FORM 990 - GENERAL EXPLANATION ATTACHMENT
===

FORM 990, PART IV, LINE 64A

IN APRIL 1999, THE DORMITORY AUTHORITY OF THE STATE OF NEW YORK (THE "DORMITORY AUTHORITY") ISSUED $117,635,000 IN INSURED, TAX-EXEMPT ADJUSTABLE RATE BONDS, THE PROCEEDS OF WHICH WERE LOANED TO THE LIBRARY. A PORTION OF THE PROCEEDS WAS USED TO ADVANCE REFUND AND REDEEM OUTSTANDING DEBT AND FOR VARIOUS CONSTRUCTION PROJECTS.

THE SERIES 1999 BONDS ARE SCHEDULED TO MATURE ON JULY 1, 2028 AND CONSIST OF TWO TAX-EXEMPT COMPONENTS: THE SERIES 1999A ADJUSTABLE RATE BONDS (THE "SERIES 1999A BONDS") IN THE AMOUNT OF $82,075,000 AND THE SERIES 1999B ADJUSTABLE RATE BONDS (THE "SERIES 1999B BONDS") IN THE AMOUNT OF $35,560,000. THE SERIES 1999 BONDS WERE ISSUED AT AN INITIAL RATE OF 4% FOR THE SIX-DAY INITIAL RATE PERIOD, AFTER WHICH THEY BEAR INTEREST AT A WEEKLY RATE BASED ON THE PREVAILING MARKET CONDITIONS FOR BONDS OF THE SAME GENERAL NATURE, UNLESS AND UNTIL THEY ARE CONVERTED TO A FIXED RATE.

IN CONNECTION WITH THE SERIES 1999A BONDS, THE LIBRARY HAS A SWAP AGREEMENT,WHEREBY THE LIBRARY PAID THE SWAP COUNTERPARTY A FIXED RATE OF 3.852% ON A NOTIONAL AMOUNT EQUAL TO THE PRINCIPAL AMOUNT OUTSTANDING ON THE SERIES 1999A BONDS AT ANY TIME, IN RETURN FOR PAYMENTS FROM THE SWAP COUNTERPARTY CALCULATED AT A RATE EQUAL TO 54.5% OF THE 1-MONTH BRITISH BANKERS' ASSOCIATION LIBOR (UNITED STATES DOLLAR), PLUS 0.31%. THE DORMITORY AUTHORITY IS NOT A PARTY TO THE AGREEMENT, AND HAS NO RIGHT TO RECEIVE PAYMENTS FROM, AND NO LIABILITY TO MAKE PAYMENTS TO, THE COUNTERPARTY. THE FAIR VALUE OF THE INTEREST RATE SWAP WAS A LIABILITY OF $2,412,000 AND $2,401,000 AT JUNE 30, 2007 AND 2006, RESPECTIVELY, AND IS REFLECTED IN INTEREST RATE SWAPS IN THE LIBRARY'S FINANCIAL STATEMENTS.

IN CONNECTION WITH THE SERIES 1999B BONDS, IN AUGUST 2004, THE LIBRARY ENTERED INTO AN INTEREST RATE SWAP AGREEMENT WHEREBY THE LIBRARY PAYS THE SWAP COUNTERPARTY A FIXED RATE OF 2.00% ON A NOTIONAL AMOUNT EQUAL TO THE PRINCIPAL AMOUNT OUTSTANDING AT ANY TIME ON THE SERIES 1999B BONDS COMMENCING ON SEPTEMBER 1, 2004 AND ENDING ON JUNE 1, 2007, AND 4.009% ON THE NOTIONAL AMOUNT FROM JULY 1, 2007 THROUGH JULY 1, 2028. THESE PAYMENTS ARE MADE IN RETURN FOR PAYMENTS FROM THE SWAP COUNTERPARTY CALCULATED AT A RATE EQUAL TO THE LOWER OF LIBOR OR 1-MONTH LIBOR, WHERE LIBOR IS EQUAL TO THE GREATER OF (A) 1-MONTH LIBOR X 68.00% OR (B) (1-MONTH LIBOR X 56.00%) PLUS 0.44%. THE DORMITORY AUTHORITY IS NOT A PARTY TO THE AGREEMENT, AND HAS NO RIGHT TO RECEIVE PAYMENTS FROM, AND NO LIABILITY TO MAKE PAYMENTS TO, THE COUNTERPARTY. THE FAIR VALUE OF THE INTEREST RATE SWAP WAS A LIABILITY OF APPROXIMATELY $453,000 AT JUNE 30,

FORM 990 - GENERAL EXPLANATION ATTACHMENT (CONT'D)

2007 AND AN ASSET OF $237,000 AT JUNE 30, 2006, AND IS REFLECTED IN INTEREST RATE SWAPS IN THE LIBRARY'S FINANCIAL STATEMENTS.

THE GAIN OR LOSS ON SWAP OBLIGATIONS IS RECORDED ANNUALLY AND IS REPORTED AS A CHANGE IN VALUE OF INTEREST RATE SWAPS IN THE LIBRARY'S STATEMENT OF ACTIVITIES.

THE CARRYING VALUE OF THE LIBRARY'S DEBT AT JUNE 30, 2007 AND 2006 APPROXIMATES ITS FAIR VALUE.

THE LIBRARY'S DEBT IS SECURED BY A MORTGAGE ON THE LIBRARY'S CONDOMINIUM UNIT IN THE SCIENCE, INDUSTRY AND BUSINESS LIBRARY BUILDING, CERTAIN GIFTS AND GRANTS RECEIVED BY THE LIBRARY FOR ITS ANNUAL FUND, AND CERTAIN EQUIPMENT AND FURNISHINGS.

OUTSTANDING LONG-TERM DEBT AT JUNE 30, ALL OF WHICH WAS BORROWED FROM THE DORMITORY AUTHORITY, CONSISTED OF THE FOLLOWING:

2007 LONG-TERM DEBT CONSISTING OF LOANS OF PROCEEDS FROM THE ISSUANCE BY THE DORMITORY AUTHORITY OF:
INSURED ADJUSTABLE RATE BONDS, MATURING JULY 1, 2028, SUBJECT TO SERIAL REDEMPTION (SERIES 1999A): $70,610,002
INSURED ADJUSTABLE RATE BONDS, MATURING JULY 1, 2028, SUBJECT TO SERIAL REDEMPTION (SERIES 1999B): $32,100,000
TOTAL: $102,710,002

FORM 990 - GENERAL EXPLANATION ATTACHMENT

FORM 990, PART VIII

LINE 93A - REVENUES RELATED TO THE CIRCULATION AND USE OF THE BRANCH LIBRARIES COLLECTIONS. FINES HELP ENSURE PROMPT RETURN OF MATERIALS, THEREBY INCREASING THEIR AVAILABILITY.

LINE 93B - DUPLICATION OF ITEMS FROM THE LIBRARY COLLECTION PROVIDES FOR EASIER PUBLIC USE AND ACCESS. DUPLICATION ALSO HELPS PRESERVE THE COLLECTIONS FOR FUTURE USE BY OTHERS.

LINE 93C - INFORMATION SERVICES PROVIDE EXPEDITED ACCESS TO THE LIBRARY'S COLLECTIONS FOR OFF-SITE USERS.

LINE 94 - THE MEMBERSHIP PROGRAM INCREASES THE PUBLIC'S AWARENESS OF THE LIBRARY'S COLLECTIONS AND SERVICES THROUGH THE USE OF MAILINGS AND SPECIAL PROGRAMS.

LINE 101 - THESE ACTIVITIES INCREASE THE PUBLIC'S AWARENESS OF THE LIBRARY AND ITS COLLECTIONS, FACILITIES AND SERVICES TO THE COMMUNITY.

LINE 102 - THE RETAIL SHOPS PROVIDE MERCHANDISE THAT IS SUBSTANTIALLY RELATED TO THE LIBRARY'S VAST COLLECTIONS AND PROVIDE A FORM OF OUTREACH TO ENCOURAGE GREATER PUBLIC USE OF THE LIBRARY RESOURCES.

LINE 103, PUBLICATIONS AND PERMISSION TO PUBLISH - REPRODUCTIONS FROM THE LIBRARY'S COLLECTIONS MAKE THESE ITEMS, AND INFORMATION ABOUT THE COLLECTIONS, MORE BROADLY ACCESSIBLE TO THE PUBLIC.

LINE 103, OTHER REVENUE - THIS REVENUE RELATES TO THE PUBLIC CIRCULATION AND USE OF THE LIBRARY'S COLLECTIONS.

FORM 990 - GENERAL EXPLANATION ATTACHMENT

FORM 990, PART I, LINE 10

SALES OF INVENTORY DETAIL:

GROSS SALES OF INVENTORY - CENTRAL RETAIL SHOP - 1,362,096
LESS: COST OF GOODS SOLD - (609,579)
GROSS PROFIT FROM SALES - 752,517

GROSS SALES OF INVENTORY - SCHOMBURG GIFT SHOP - 225,641
LESS: COST OF GOODS SOLD - (131,404)
GROSS PROFIT FROM SALES - 94,237

TOTAL GROSS SALES OF INVENTORY: 1,587,737
LESS TOTAL COST OF GOODS SOLD: (740,983)
TOTAL GROSS PROFIT FROM SALES: 846,754

FORM 990 - GENERAL EXPLANATION ATTACHMENT
===

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS AND TRUSTEES
STATEMENTS 28 THROUGH 35

THE 35 HOURS LISTED IS THE MINIMUM NUMBER OF WORK HOURS PER WEEK REQUIRED OF FULL-TIME STAFF. IT SHOULD BE NOTED THAT STAFF OFTEN WORK SUBSTANTIALLY IN EXCESS OF THE MINIMUM REQUIRED HOURS TO ACCOMPLISH THEIR POSITION REQUIREMENTS.

LIFE AND HONORARY TRUSTEES:
IN ADDITION TO THE VOTING TRUSTEES WHO ARE LISTED IN FORM 990, PART V-A, THE LIBRARY'S BOARD OF TRUSTEES ALSO INCLUDE AN HONORARY CHAIRMAN OF THE BOARD, AND LIFE AND HONORARY TRUSTEES WHO ARE NON-VOTING MEMBERS OF THE BOARD. THEY ARE AS FOLLOWS:

HONORARY CHAIRMAN - MRS. VINCENT ASTOR

LIFE TRUSTEES: JOHN P. BIRKELUND, SOL NEIL CORBIN, DOROTHY CULLMAN, LEWIS B. CULLMAN, BARBARA G. FLEISHMAN, BARBARA GOLDSMITH, ALAN C. GREENBERG, JOHN H. GUTFREUND, RALPH E. HANSMANN, PATRICIA D. KLINGENSTEIN, HAROLD W. MCGRAW, JR., ROBERT B. MENSCHEL, TONI MORRISON, SUZANNE C. MUELLER, JACK NASH, HAROLD PRINCE, SANDRA PRIEST ROSE, JOHN T. SARGENT, ROBERT B. SILVERS, AND SUE ANN WEINBERG.

HONORARY TRUSTEES: RHETT AUSTELL, KENNETH S. AXELSON, THE HONORABLE DONALD M. BLINKEN, DR. WILLIAM M. BOYD II, EDGAR BRONFMAN, JR., FREDERICK H. BURKHARDT, WILLIAM M. DIETEL, BARRY DILLER, ROBERT R. DOUGLASS, CARLOS FUENTES, LOUIS V. GERSTNER, JR., ANN G. GETTY, VARTAN GREGORIAN, CONRAD K. HARPER, JOHN F. MCGILLICUDDY, JOHN P. MASCOTTE, HAMISH MAXWELL, HENRY MCKINNELL, STANLEY G. MORTIMER III, MRS. CARL H. PFORZHEIMER, JR. (CAROL), DIANE S. RAVITCH, CAROLYNE ROEHM, RICHARD E. SALOMON, STEPHEN STAMAS, SAUL P. STEINBERG, ALFRED R. STERN, AND TOM WOLFE.

FORM 990, PART I - OTHER INVESTMENT INCOME

DESCRIPTION	AMOUNT
INV INC LIMITED PARTNER - PRIVATE	558,657.
TOTAL	558,657.

STATEMENT 11

FORM 990, PART I - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT
LIBRARY LIONS GALA	2,376,412.
CORPORATE DINNER	1,877,650.
LITERARY LUNCHEON	330,290.
OTHER (3 EVENTS)	778,323.
TOTAL	5,362,675.

STATEMENT 12

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
LIBRARY LIONS GALA	75,735.	94,940.	-19,205.
CORPORATE DINNER	62,700.	57,379.	5,321.
LITERARY LUNCHEON	48,300.	40,739.	7,561.
OTHER (3 EVENTS)	39,722.	31,700.	8,022.
TOTALS	226,457.	224,758.	1,699.

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES

DESCRIPTION	AMOUNT
CENTRAL RETAIL SHOP - SEE GEA FOR MORE DETAIL	1,362,096.
SCHOMBURG GIFT SHOP - SEE GEA FOR MORE DETAIL	225,641.
TOTAL	1,587,737.

FORM 990, PART I - COST OF GOODS SOLD

INVENTORY AT BEGINNING OF YEAR	
PURCHASES	
SALARIES AND WAGES	
OTHER COSTS	
SUBTOTAL	
MINUS ENDING INVENTORY	
COST OF GOODS SOLD	740,983.

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

DESCRIPTION		AMOUNT
NET UNREALIZED GAINS		83,638,600.
	TOTAL	83,638,600.

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION	AMOUNT
CHANGE IN VALUE OF INTEREST RATE SWAPS	700,866.
EFFECT OF ADOPTION FASB STMT 158	26,656,000.
ASSET RETIREMENT OBLIGATIONS	1,479,644.
TOTAL	28,836,510.

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRANTS PAID			
BARBARA KRAUTHAMER 6 WASHINGTON SQUARE N. GARDEN NEW YORK, NY 10003	NONE	FELLOWSHIP PROGRAM	25,000.
BEN KATCHOR, INC. 240 WEST 102ND STREET NEW YORK, NY 10025	NONE	FELLOWSHIP PROGRAM	50,000.
CARLA KAPLAN 2133 EWING STREET LOS ANGELES, CA 90039	NONE	FELLOWSHIP PROGRAM	50,000.
CHAD WILLIAMS 198 COLLEGE HILL ROAD CLINTON, NY 13323	NONE	FELLOWSHIP PROGRAM	25,000.
CLIVE FISHER 108 EAST 38TH STREET NEW YORK, NY 10016	NONE	FELLOWSHIP PROGRAM	50,000.
DAVID W. BLIGHT 313 ST. ROWAN STREET NEW HAVEN, CT 06511	NONE	FELLOWSHIP PROGRAM	50,000.
FARAH JASMINE GRIFFIN 90 MORNINGSIDE DRIVE NEW YORK, NY 10027	NONE	FELLOWSHIP PROGRAM	50,000.
JAMES MILLER 65 FIFTH AVENUE ROOM 231 NEW YORK, NY 10003	NONE	FELLOWSHIP PROGRAM	50,000.

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JAMES SHAPIRO 454 RIVERSIDE DRIVE NEW YORK, NY 10027	NONE	FELLOWSHIP PROGRAM	50,000.
JEFFREY TALARIGO 518 WEST 111TH STREET NEW YORK, NY 10025	NONE	FELLOWSHIP PROGRAM	50,000.
KAZIA PAGE 13 OAK DRIVE HAMILTON, NY 13346	NONE	FELLOWSHIP PROGRAM	25,000.
LAURIE SHECK 303 MERCER STREET NEW YORK, NY 10003	NONE	FELLOWSHIP PROGRAM	50,000.
MALINDA LINDQUIST 200 OAK STREET SE MINNEAPOLIS, MN 55455	NONE	FELLOWSHIP PROGRAM	25,000.
MAYA JASANOFF 330 MONTICELLO ROAD CHARLOTTESVILLE, VA 22902	NONE	FELLOWSHIP PROGRAM	50,000.
MOHAMMED ALI 428 PROSPECT PLACE BROOKLYN, NY 11238	NONE	FELLOWSHIP PROGRAM	50,000.
NELSON SMITH 246 WEST END AVENUE NEW YORK, NY 10023	NONE	FELLOWSHIP PROGRAM	50,000.

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
RAPHAEL CHIJIOKE NJOKU 10518 HARROGATE CT. LOUISVILLE, KY 40229	NONE	FELLOWSHIP PROGRAM	25,000.
SEAN WILENTZ 4 NEW SOUTH-P.O. BOX 36 PRINCETON, NJ 08544	NONE	FELLOWSHIP PROGRAM	50,000.
SHARON CAMERON 11 FIFTH AVENUE NEW YORK, NY 10003	NONE	FELLOWSHIP PROGRAM	50,000.
VENUS GREEN 236 WEST 137TH STREET NEW YORK, NY 10030	NONE	FELLOWSHIP PROGRAM	25,000.
WILL ENO 97 NEWEL STREET BROOKLYN, NY 11222	NONE	FELLOWSHIP PROGRAM	50,000.
		TOTAL CONTRIBUTIONS PAID	900,000.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
BOOKS AND BINDING	27,030,939.	27,030,939.		
BUILDING REPAIRS & RENOVATION	5,129,871.	5,129,871.		
EQUIPMENT PURCHASE	2,336,262.	2,320,094.		16,168.
CONSULTING & OTHER PROF FEES	11,541,843.	8,144,095.	3,282,567.	115,181.
PROM. EXHIBITS, SPEC. EV.	2,736,301.	1,261,188.	214,458.	1,260,655.
INSURANCE EXPENSE	2,096,778.	172,137.	1,924,641.	
INVESTMENT EXPENSE	5,483,022.		5,483,022.	
AMORTIZATION	71,140.	71,140.		
OTHER EXPENSES	608,838.	20,327.	588,511.	
TOTALS	57,034,994.	44,149,791.	11,493,199.	1,392,004.

FORM 990, PART IV - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
COMMON STOCKS-INCL SEC REC/PAY	145,768,278.	FMV
BONDS	64,411,985.	FMV
MUTUAL FUNDS	8,246,671.	FMV
LTD PARTNERSHIP INVESTMENTS	471,170,562.	FMV
TOTALS	689,597,496.	

FORM 990, PART IV - INVESTMENTS - OTHER SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
ENDOWMENT CASH HELD FOR LT INV	73,475,363.	FMV
TOTALS	73,475,363.	

FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION	ENDING BOOK VALUE
INV LTD PARTNERSHIPS-PRIVATE	39,820,001.
TOTALS	39,820,001.

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION	ENDING BOOK VALUE
OTHER ASSETS - SEE GEA	5,957,852.
TOTALS	5,957,852.

STATEMENT 25

FORM 990, PART IV - TAX-EXEMPT BOND LIABILITIES

DESCRIPTION			ENDING BOOK VALUE
SEE GENERAL EXPLAN. ATTACHMENT			70,610,002.
UNEXPENDED PROCEEDS:		NONE	
THIRD PARTY PERCENTAGE:	0		
SEE GENERAL EXPLAN. ATTACHMENT			32,100,000.
UNEXPENDED PROCEEDS:		NONE	
THIRD PARTY PERCENTAGE:	0		
TOTALS			102,710,002.

STATEMENT 26

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	ENDING BOOK VALUE
ACCRUED POSTRETIRE. BENEFITS	116,021,000.
INTEREST RATE SWAP AGREEMENTS	2,865,304.
TOTALS	118,886,304.

STATEMENT 27

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PAUL LECLERC 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	PRESIDENT, CEO & TRUSTEE 40.00	654,335.	88,880.	NONE
DAVID FERRIERO 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	DIR & CHIEF EXEC-RL 35.00	318,554.	37,809.	NONE
SUSAN KENT 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	DIR & CHIEF EXEC-BL 35.00	318,554.	NONE	NONE
CATHERINE CARVER DUNN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	SR. VP EXT AFFAIRS 35.00	318,554.	49,275.	NONE
DAVID OFFENSEND 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	SR. VP & CFO 35.00	307,782.	48,213.	NONE
ROBERT J VANNI 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP & GENERAL COUNSEL 35.00	278,369.	36,232.	NONE
JACQUELINE F BAUSCH 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	DEPUTY GEN COUNSEL 35.00	206,058.	38,175.	NONE
ANTHONY CALNEK 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP COMM. & MKTG 35.00	129,190.	22,830.	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SHARON HEWITT WATKINS 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	AVP & CONTROLLER 35.00	180,514.	35,656.	NONE
HEATHER LUBOV 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP DEVELOPMENT 35.00	172,824.	23,386.	NONE
JOANNA M PESTKA 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP CAPITAL PLANNING 35.00	174,410.	31,533.	NONE
JAMES PISANIELLO 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	AVP SECURITY & DIST. 35.00	147,990.	1,706.	NONE
JEFFREY ROTH 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP BUDGET & PLANNING 35.00	180,514.	24,190.	NONE
PRISCILLA J SOUTHON 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP HUMAN RESOURCES 35.00	228,297.	36,899.	NONE
DAVID STURM 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	VP & CIO INFO.TECH. 35.00	237,985.	42,189.	NONE
CASEY D WHALEN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	CHIEF INV. OFFICER 35.00	194,054.	22,978.	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JOHN H BANKS III 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 4.00	NONE	NONE	NONE
TIMOTHY R BARAKETT 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 2.00	NONE	NONE	NONE
SAMUEL C BUTLER 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 21.00	NONE	NONE	NONE
SILA M CALDERON 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 3.00	NONE	NONE	NONE
JOAN HARDY CLARK 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 10.00	NONE	NONE	NONE
ROBERT DARNTON 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 4.00	NONE	NONE	NONE
GORDON J DAVIS 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 4.00	NONE	NONE	NONE
ANNE E DE LA RENTA 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 7.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ANDREAS C DRACOPOULOS 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 4.00	NONE	NONE	NONE
JAMES H DUFFY 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE
HRH PRINCESS FIRYAL OF JORDAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 5.00	NONE	NONE	NONE
HENRY LOUIS GATES JR 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 5.00	NONE	NONE	NONE
WILLIAM GRAY 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE
LOUISE L GRUNWALD 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 13.00	NONE	NONE	NONE
ROGER HERTOG 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 8.00	NONE	NONE	NONE
MAHNAZ ISPAHANI 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
KEVIN W KENNEDY 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 9.00	NONE	NONE	NONE
ROBERT LIBERMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE
HAROLD W MCGRAW III 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE
RAYMOND J MCGUIRE 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE
THE HONORABLE VICTOR MARRERO 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 4.00	NONE	NONE	NONE
CATHERINE C MARRON 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 30.00	NONE	NONE	NONE
ABBY S MILSTEIN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 14.00	NONE	NONE	NONE
SUSAN M NEWHOUSE 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JESSYE NORMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 1.00	NONE	NONE	NONE
CARL H PFORZHEIMER III 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 16.00	NONE	NONE	NONE
KATHARINE J RAYNER 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 13.00	NONE	NONE	NONE
DAVID REMNICK 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 5.00	NONE	NONE	NONE
ELIZABETH ROHATYN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 12.00	NONE	NONE	NONE
MARSHALL ROSE 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 14.00	NONE	NONE	NONE
NEIL L RUDENSTINE 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 6.00	NONE	NONE	NONE
ERIC S SCHWARTZ 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 7.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
STEPHEN A SCHWARZMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 8.00	NONE	NONE	NONE
GAYFRYD STEINBERG 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 13.00	NONE	NONE	NONE
JOSHUA L STEINER 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 13.00	NONE	NONE	NONE
JAMES S TISCH 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 7.00	NONE	NONE	NONE
CALVIN TRILLIN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 9.00	NONE	NONE	NONE
MELVIN T TUKMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 4.00	NONE	NONE	NONE
EDGAR WACHENHEIM III 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	TRUSTEE 19.00	NONE	NONE	NONE
MAYOR BLOOMBERG OR REP 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	EX-OFFICIO 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SPEAKER CITY COUNCIL QUINN OR REP 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	EX-OFFICIO 2.00	NONE	NONE	NONE
COMPTROLLER THOMPSON OR REP 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	EX-OFFICIO 7.00	NONE	NONE	NONE
ROBERT B MENSCHEL 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	LIFE TRUSTEE	NONE	NONE	NONE
DOROTHY CULLMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	LIFE TRUSTEE	NONE	NONE	NONE
LEWIS B CULLMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	LIFE TRUSTEE	NONE	NONE	NONE
	GRAND TOTALS	4,047,984.	539,951.	NONE

FORM 990, PART V-A RELATIONSHIP SCHEDULE

RELATIONSHIP SCHEDULE

NAME OF OFFICER, DIRECTOR, ETC:	SAMUEL C BUTLER
NAME OF RELATED ENTITY:	CRAVATH SWAINE & MOORE
TITLE OR ROLE:	SPECIAL COUNSEL
RELATIONSHIP:	BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	JAMES H DUFFY
NAME OF RELATED ENTITY:	CRAVATH SWAINE & MOORE
TITLE OR ROLE:	RETIRED PARTNER
RELATIONSHIP:	BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	LOUISE L GRUNWALD
NAME OF RELATED ENTITY:	ROBERT LIBERMAN
TITLE OR ROLE:	TRUSTEES
RELATIONSHIP:	FAMILY RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	MAHNAZ ISPAHANI
NAME OF RELATED ENTITY:	EDGAR WACHENHEIM
TITLE OR ROLE:	TRUSTEES
RELATIONSHIP:	FAMILY RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	KEVIN W KENNEDY
NAME OF RELATED ENTITY:	GOLDMAN SACHS
TITLE OR ROLE:	MANAGING DIRECTOR
RELATIONSHIP:	BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	ERIC S SCHWARTZ
NAME OF RELATED ENTITY:	GOLDMAN SACHS
TITLE OR ROLE:	MANAGING DIRECTOR
RELATIONSHIP:	BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	ROBERT B MENSCHEL
NAME OF RELATED ENTITY:	GOLDMAN SACHS
TITLE OR ROLE:	SENIOR DIRECTOR
RELATIONSHIP:	BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC:	DOROTHY CULLMAN
NAME OF RELATED ENTITY:	LEWIS B CULLMAN
TITLE OR ROLE:	TRUSTEES
RELATIONSHIP:	FAMILY RELATIONSHIP

FORM 990, PART V-B - FORMER OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	LOANS AND ADVANCES	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MARY K CONWELL 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	5,641.	NONE
PAUL FASANA 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	4,926.	NONE
JAMES HENDERSON 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	4,483.	NONE
NORMAN HOLMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	13,960.	NONE
EDWIN HOLMGREN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	10,334.	NONE
ANTHONY JIGA 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	20,798.	NONE
BERNICE MACDONALD 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	4,926.	NONE
SAMUEL MEMBERG 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	5,640.	NONE

FORM 990, PART V-B - FORMER OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	LOANS AND ADVANCES	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
WILLIAM WALKER 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	13,986.	NONE
MICHAEL ZAVELLE 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	NONE	NONE	20,798.	NONE
GRAND TOTALS	NONE	NONE	105,492.	NONE

FORM 990, PART VI - NAMES OF RELATED ORGANIZATIONS
===

RELATED ORGANIZATION NAME: BRYANT PARK RESTORATION CORP.

EXEMPT: X NONEXEMPT:

RELATED ORGANIZATION NAME: RESEARCH COLLECTIONS AND PRESERVATION

EXEMPT: X NONEXEMPT:

FORM 990, PART VI, LINE 90A - STATES
=====================================

AL,AK,AZ,AR,CA,CT,FL,GA,
IL,KS,KY,LA,ME,MD,MA,MI,MN,MS,NH,NJ,NM,
NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI,

FORM 990, PART VII - OTHER REVENUE

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
ROYALTIES			15	92,630.	
FEES-USE OF SPACE	532000	622,168.	16	1,978,669.	
PUB & PERM TO PUB					512,106.
UNIVERSAL SERVICE			01	1,303,480.	
OTHER REVENUE					1,050,508.
TOTALS		622,168.		3,374,779.	1,562,614.

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT
JEAN STROUSE 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	DIR. CULLMAN CENTER 35.00	196,588.	24,814.	NONE
DAVID N ROSENSWEIG 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	PROJ. DIR. ILS 35.00	180,501.	33,799.	NONE
HEIKE KORDISH 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	DIR. HSSL 35.00	177,426.	33,564.	NONE
ALLYS FUTERMAN 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	MGR. DISB-FIN SYS 35.00	175,573.	34,462.	NONE
MARY FRANCES COOPER 5TH AVENUE & 42ND STREET NEW YORK, NY 10016	DEP. DIR. BR LIB 35.00	175,205.	25,379.	NONE
	TOTAL COMPENSATION	905,293.	152,018.	NONE

SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.

BOOZ ALLEN AND HAMILTON INC P.O. BOX 88917 CHICAGO, IL 60695-1917	CONSULTING SERVICES	1,269,900.
WJE ENGINEERS AND ARCHITECTS PC 330 PFINGSTEN ROAD NORTHBROOK, IL 60062	ARCHITECTURAL DESIGN	1,215,431.
ONESOURCE NY INC P.O. BOX 198352 ATLANTA, GA 30384-8352	MAINTENANCE SERVICES	534,652.
RIVERSIDE LANGUAGE PRO INC 490 RIVERSIDE DRIVE NEW YORK, NY 10027	EDUCATIONAL SERVICES	517,552.
GENSLER ARCHITECTURAL DESIGN AND PLAN PC ONE ROCKEFELLER PLAZA NEW YORK, NY 10020	ARCHITECTURAL DESIGN	379,464.
TOTAL COMPENSATION		3,916,999.

SCH. A, PART II-B COMPENSATION OF THE 5 HIGHEST PAID FOR OTHER SERV.

SPARTAN SECURITY SERVICES INC ONE PARK AVENUE NEW YORK, NY 10016	SECURITY SERVICES	2,592,989.
GANNON CONTRACTING LLC 49 WEST 38TH STREET NEW YORK, NY 10018	CONSTRUCTION	1,082,170.
HEWLETT-PACKARD CO 8000 FOOTHILLS BLVD MS 5511 ROSEVILLE, CA 95747	COMPUTER SERVICES	820,899.
RESEARCH COLLECTION AND PRESERVATION 400 FORRESTAL ROAD PRINCETON, NJ 08544	PRESERVATION SERVICE	566,174.
ALL COUNTY PLUMBING AND HEATING CORP 799 CONEY ISLAND AVENUE BROOKLYN, NY 11218	CONSTRUCTION	533,924.
TOTAL COMPENSATION		5,596,156.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

JOHN H. BANKS III IS A TRUSTEE OF THE LIBRARY AND A VICE PRESIDENT OF CONSOLIDATED EDISON COMPANY OF NEW YORK. THE LIBRARY USES THE SERVICE OF CONSOLIDATED EDISON COMPANY OF NEW YORK AND COMPENSATES IT AT MARKET RATES.

GORDON J. DAVIS, ESQ. IS A TRUSTEE OF THE LIBRARY AND A PARTNER OF LEBOEUF, LAMB, GREENE & MCRAE, LLP, A NEW YORK CITY BASED LAW FIRM. THE LIBRARY USES THE FIRM FOR GENERAL LEGAL COUNSEL AND COMPENSATES THE FIRM ACCORDINGLY. MR. DAVIS IS ALSO A DIRECTOR OF CONSOLIDATED EDISON, INC., THE LIBRARY USES THE SERVICES OF CONSOLIDATED EDISON COMPANY OF NEW YORK, A SUBSIDIARY OF CONSOLIDATED EDISON, INC. AND COMPENSATES IT AT MARKET RATES.

KEVIN W. KENNEDY IS A TRUSTEE OF THE LIBRARY AND MANAGING DIRECTOR OR GOLDMAN, SACHS & COMPANY (GS&CO), A NEW YORK CITY BASED INVESTMENT BANKING FIRM. IN ADDITION, ERIC S. SCHWARTZ IS A TRUSTEE OF THE LIBRARY AND A MANAGING DIRECTOR OF GS&CO, AND ROBERT B. MENSCHEL BECAME A LIFE TRUSTEE OF THE LIBRARY IN NOVEMBER OF 2004 AND IS A SENIOR DIRECTOR OF GS&CO. IN CONNECTION WITH THE ISSUANCES OF THE NEW YORK PUBLIC LIBRARY'S INSURED REVENUE BONDS, SERIES 1999A AND 1999B BONDS, THE LIBRARY HAS ENTERED INTO INTEREST RATE SWAP AGREEMENTS WITH AN AFFILIATE OF GS&CO, WHEREBY THE LIBRARY PAYS A FIXED RATE IN RETURN FOR PAYMENTS FROM THE AFFILIATE CALCULATED AT A VARIABLE RATE. THIS SWAP AGREEMENT TERMINATES JULY 1, 2028. THE LIBRARY ALSO PARTICIPATES IN FOUR LIMITED REAL ESTATE INVESTMENT PARTNERSHIPS ORGANIZED AND MANAGED BY, AND THE GENERAL PARTNER OF WHICH IS, AN ENTITY OF GS&CO. THREE OF THE PARTNERSHIPS ARE WITH THE ENTITY NAMED WHITEHALL AND THE FOURTH IS WITH THE ENTITY NAMED GS VINTAGE FUND IV.

HAROLD W. MCGRAW III, IS A TRUSTEE OF THE LIBRARY AND CHAIRMAN, PRESIDENT AND CEO OF MCGRAW HILL COMPANIES, A GLOBAL PUBLISHING, FINANCIAL, INFORMATION AND MEDIA SERVICES COMPANY. THE LIBRARY USES THE FIRM FOR GENERAL ACCESS AND PURCHASE OF PRINTED MATERIALS.

RAYMOND J. MCGUIRE, IS A TRUSTEE OF THE LIBRARY AND MANAGING DIRECTOR AND CO-HEAD OF CITIGROUP GLOBAL INVESTMENT BANKING, AN INTERNATIONAL FINANCIAL COMPANY. THE LIBRARY USES BANKING SERVICES OFFERED AT CITIBANK BRANCHES.

THE LIBRARY ALSO REIMBURSES OFFICERS AND KEY EMPLOYEES FOR ORDINARY, NECESSARY, AND REASONABLE EXPENSES INCURRED UNDER AN ACCOUNTABLE PLAN IN THE CONDUCT OF LIBRARY BUSINESS.

IN ADDITION, SEE FORM 990, PARTS V-A & V-B.

SCHEDULE A, PART III - EXPLANATION FOR LINE 3A

THE LIBRARY HAS SEPARATE FELLOWSHIP PROGRAMS IN THE HUMANITIES AND SOCIAL SCIENCES LIBRARY-THE DOROTHY AND LEWIS B. CULLMAN CENTER FOR SCHOLARS AND WRITERS-AND IN THE SCHOMBURG CENTER FOR RESEARCH IN BLACK CULTURE-THE SCHOLARS-IN-RESIDENCE PROGRAM. THE PROGRAMS ARE INTENDED TO CONNECT THE FELLOWS WITH THE RESOURCES OF THE LIBRARY; TO PROMOTE INTERPRETATIVE AND CREATIVE SCHOLARSHIP AND WRITING; TO ENCOURAGE FELLOWS TO PRODUCE SCHOLARLY AND CREATIVE WORKS, AND TO PRESENT THEIR ORIGINAL WORK IN PAPERS, SYMPOSIA OR LECTURES TO THE PUBLIC; AND TO FOSTER PUBLIC DISCOURSE ABOUT ISSUES RELATING TO HISTORY, CULTURE AND CREATIVITY. BROCHURES FOR THE PROGRAMS ARE MAILED TO NUMEROUS JOURNALS AND INSTITUTIONS IN THE FIELDS OF HUMANITIES, SOCIAL SCIENCES AND BLACK STUDIES. ANNOUNCEMENTS OF THE PROGRAMS ARE ALSO POSTED ON THE LIBRARY'S WEBSITE.

CULLMAN CENTER FELLOWSHIPS AT THE HUMANITIES AND SOCIAL SCIENCES LIBRARY ARE OPEN TO ACADEMICS, INDEPENDENT SCHOLARS, AND CREATIVE WRITERS. THE CENTER HAS TWO COMMITTEES; A PRELIMINARY REVIEWING PANEL, WHICH ASSESSES AND RANKS THE APPLICATIONS, AND A SELECTION COMMITTEE, WHICH REVIEWS THE FINALISTS AND CHOOSES THE CLASS OF FELLOWS. THE SELECTION COMMITTEE IS COMPRISED OF SEVEN INDIVIDUALS. FELLOWSHIPS IN THE SCHOLARS-IN-RESIDENCE PROGRAM AT THE SCHOMBURG CENTER ARE OPEN TO ACADEMICS AND INDEPENDENT SCHOLARS. THE SCHOMBURG CENTER'S SELECTION COMMITTEE REVIEWS THE APPLICATIONS AND SELECTS THE FELLOWS. THE SELECTION COMMITTEE IS COMPRISED OF FIVE TO SIX EXTERNAL REVIEWERS, WHO SERVE UNDER THE DIRECTION OF THE PROGRAM DIRECTOR.

FOR BOTH CENTERS, THE CRITERIA FOR SELECTION INCLUDE:

THE RELEVANCE OF THE PROPOSED PROJECT TO THE HOLDINGS OF THE LIBRARY. (THIS CRITERION IS SOMEWHAT FLEXIBLE FOR CREATIVE WRITERS.) THE QUALITY AND FEASIBILITY OF THE PROJECT PLAN AND THE LIKELIHOOD THAT THE PROJECT WILL BE COMPLETED SUCCESSFULLY.

A RECORD OF SIGNIFICANT ACCOMPLISHMENT BY THE APPLICANT IN HIS OR HER FIELD OR DISCIPLINE.

LETTERS OF RECOMMENDATION FROM OTHER SCHOLARS OR WRITERS IN SUPPORT OF THE PROJECT.

SCHEDULE A, PART VI-B - LOBBYING ACTIVITY EXPLANATION

VOLUNTEERS: THE LIBRARY WORKS DIRECTLY WITH LOCAL VOLUNTEERS WHO ENCOURAGE THEIR ELECTED OFFICIALS TO SUPPORT THE LIBRARY'S BUDGET GOALS.

PAID STAFF OR MANAGEMENT: THE LIBRARY EMPLOYS A SMALL IN-HOUSE GOVERNMENT RELATIONS STAFF THAT WORKS WITH ELECTED OFFICIALS AT THE FEDERAL, STATE AND CITY LEVELS ON LIBRARY-RELATED FUNDING ISSUES AND LEGISLATION.

MAILINGS TO MEMBERS, LEGISLATORS OR THE PUBLIC: THE LIBRARY PREPARES MAILINGS TO ELECTED OFFICIALS AT ALL THREE LEVELS OF GOVERNMENT REGARDING FUNDING ISSUES AND LEGISLATION.

DIRECT CONTACT WITH LEGISLATORS, THEIR STAFFS, GOVERNMENT OFFICIALS, OR A LEGISLATIVE BODY: THE LIBRARY'S IN-HOUSE GOVERNMENT RELATIONS STAFF, WITH THE ASSISTANCE OF LOBBYISTS IN ALBANY, NEW YORK AND WASHINGTON, DC, MEET ELECTED AND APPOINTED GOVERNMENT OFFICIALS AND THEIR STAFFS ON LIBRARY-RELATED FUNDING ISSUES AND LEGISLATION.

SCHEDULE D (Form 1041)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ **Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).**

OMB No. 1545-0092

2006

Name of estate or trust: NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS

Employer identification number: 13-1887440

Note: *Form 5227 filers need to complete **only** Parts I and II.*

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 35)	(f) Gain or (Loss) for the entire year (col. (d) less col. (e))
1						

2	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	2	
3	Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	3	
4	Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2005 Capital Loss Carryover Worksheet	4	( )
5	**Net short-term gain or (loss).** Combine lines 1 through 4 in column (f). Enter here and on line 13, column (3) below ▶	5	

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 35)	(f) Gain or (Loss) for the entire year (col. (d) less col. (e))
6						
	SEE STATEMENT 1			120,594,398.	73,332,568.	47,261,830.

7	Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	7	
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	8	
9	Capital gain distributions	9	
10	Gain from Form 4797, Part I	10	
11	Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2005 Capital Loss Carryover Worksheet	11	( )
12	**Net long-term gain or (loss).** Combine lines 6 through 11 in column (f). Enter here and on line 14a, column (3) below ▶	12	47,261,830.

Part III Summary of Parts I and II

Caution: *Read the instructions **before** completing this part.*

			(1) Beneficiaries' (see page 36)	(2) Estate's or trust's	(3) Total
13	**Net short-term gain or (loss)**	13			
14	**Net long-term gain or (loss):**				
a	Total for year	14a			47,261,830.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet on page 36)	14b			
c	28% rate gain	14c			
15	**Total net gain or (loss).** Combine lines 13 and 14a ▶	15			47,261,830.

Note: *If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4. If lines 14a and 15, column (2), are net gains, go to Part V, and **do not** complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet,** as necessary.*

Part IV **Capital Loss Limitation**

16 Enter here and enter as a (loss) on Form 1041, line 4, the **smaller** of:			
a The loss on line 15, column (3) **or**			
b $3,000		16	( )

If the loss on line 15, column (3), is more than $3,000, ***or*** *if Form 1041, page 1, line 22, is a loss, complete the* ***Capital Loss Carryover Worksheet*** *on page 39 of the instructions to determine your capital loss carryover.*

Part V **Tax Computation Using Maximum Capital Gains Rates** (Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), **and** Form 1041, line 22 is more than zero.)

Note: *If line 14b, column (2) or line 14c, column (2) is more than zero, complete the worksheet on page 38 of the instructions and skip Part V. Otherwise, go to line 17.*

17 Enter taxable income from Form 1041, line 22			17			
18 Enter the **smaller** of line 14a or 15 in column (2) but not less than zero	18					
19 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2)	19					
20 Add lines 18 and 19	20					
21 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- ▶	21					
22 Subtract line 21 from line 20. If zero or less, enter -0-			22			
23 Subtract line 22 from line 17. If zero or less, enter -0-			23			
24 Enter the **smaller** of the amount on line 17 or $2,050			24			
25 Is the amount on line 23 equal to or more than the amount on line 24? ☐ **Yes.** Skip lines 25 through 27; go to line 28 and check the "No" box. ☐ **No.** Enter the amount from line 23			25			
26 Subtract line 25 from line 24			26			
27 Multiply line 26 by 5% (.05)					27	
28 Are the amounts on lines 22 and 26 the same? ☐ **Yes.** Skip lines 28 through 31; go to line 32. ☐ **No.** Enter the **smaller** of line 17 or line 22			28			
29 Enter the amount from line 26 (If line 26 is blank, enter -0-)			29			
30 Subtract line 29 from line 28			30			
31 Multiply line 30 by 15% (.15)					31	
32 Figure the tax on the amount on line 23. Use the 2006 Tax Rate Schedule on page 23 of the instructions					32	
33 Add lines 27, 31, and 32					33	
34 Figure the tax on the amount on line 17. Use the 2006 Tax Rate Schedule on page 23 of the instructions					34	
35 **Tax on all taxable income.** Enter the **smaller** of line 33 or line 34 here and on line 1a of Schedule G, Form 1041					35	

JSA
6F1220 3.000

Schedule D Detail of Long-term Capital Gains and Losses

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPITAL GAINS (LOSSES) FROM SECURITIES					
PUBLICLY TRADED SECURITIES	VAR	VAR	120,594,398.	73,332,568.	47,261,830.
TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES			120,594,398.	73,332,568.	47,261,830.
Totals			120,594,398.	73,332,568.	47,261,830.

Form **4797**

Department of the Treasury
Internal Revenue Service (99)

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return. ► See separate instructions.

OMB No. 1545-0184

2006

Attachment Sequence No. **27**

Name(s) shown on return: NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS

Identifying number: 13-1887440

1	Enter the gross proceeds from sales or exchanges reported to you for 2006 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)	1	

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions)

	(a) Description of property	**(b)** Date acquired (mo., day, yr.)	**(c)** Date sold (mo., day, yr.)	**(d)** Gross sales price	**(e)** Depreciation allowed or allowable since acquisition	**(f)** Cost or other basis, plus improvements and expense of sale	**(g) Gain or (loss)** Subtract (f) from the sum of (d) and (e)
2							

3	Gain, if any, from Form 4684, line 42	3	
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6	Gain, if any, from line 32, from other than casualty or theft	6	
7	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:	7	
	Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.		
	Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.		
8	Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)	9	

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

(a)	(b)	(c)	(d)	(e)	(f)	(g)
SEE STATEMENT 1						12,789,860.

11	Loss, if any, from line 7	11	( )
12	Gain, if any, from line 7 or amount from line 8, if applicable	12	
13	Gain, if any, from line 31	13	
14	Net gain or (loss) from Form 4684, lines 34 and 41a	14	
15	Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17	Combine lines 10 through 16	17	12,789,860.
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:		
a	If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 22. Identify as from "Form 4797, line 18a." See instructions	18a	
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14	18b	

For Paperwork Reduction Act Notice, see separate instructions. Form **4797** (2006)

Part III **Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255** (see instructions)

19	(a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			

These columns relate to the properties on lines 19A through 19D. ▶		Property A	Property B	Property C	Property D
20 Gross sales price (**Note:** *See line 1 before completing.*)	20				
21 Cost or other basis plus expense of sale	21				
22 Depreciation (or depletion) allowed or allowable	22				
23 Adjusted basis. Subtract line 22 from line 21	23				
24 Total gain. Subtract line 23 from line 20	24				
25 **If section 1245 property:**					
a Depreciation allowed or allowable from line 22	25a				
b Enter the **smaller** of line 24 or 25a	25b				
26 **If section 1250 property:** If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a Additional depreciation after 1975 (see instructions)	26a				
b Applicable percentage multiplied by the **smaller** of line 24 or line 26a (see instructions)	26b				
c Subtract line 26a from line 24. If residential rental property **or** line 24 is not more than line 26a, skip lines 26d and 26e	26c				
d Additional depreciation after 1969 and before 1976	26d				
e Enter the **smaller** of line 26c or 26d	26e				
f Section 291 amount (corporations only)	26f				
g Add lines 26b, 26e, and 26f	26g				
27 **If section 1252 property:** Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).					
a Soil, water, and land clearing expenses	27a				
b Line 27a multiplied by applicable percentage (see instructions)	27b				
c Enter the **smaller** of line 24 or 27b	27c				
28 **If section 1254 property:**					
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see instructions)	28a				
b Enter the **smaller** of line 24 or 28a	28b				
29 **If section 1255 property:**					
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a				
b Enter the **smaller** of line 24 or 29a (see instructions)	29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 36. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV **Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less** (see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33		
34 Recomputed depreciation (see instructions)	34		
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		

NEW YORK PUBLIC LIBRARY, ASTOR, LENOX 13-1887440

Supplement to Form 4797 Part II Detail

Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed or Allowable	Cost or Other Basis	Gain or (Loss) for entire year
LTD PARTNERSHIPS VAR	VAR	VAR	19063666.		11273806.	7,789,860.
DONATED ARTWORK	VAR	VAR	5,000,000.			5,000,000.
Totals						12789860.

8868

- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box . . ▶ ☑

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

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

Part II **Additional (not automatic) 3-Month Extension of Time.** You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization: The New York Public Library, Astor, Lenox and Tilden Foundations	**Employer identification number** 13 : 1887440
	Number, street, and room or suite no. If a P.O. box, see instructions. 188 Madison Avenue, 5th Floor	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. New York, New York 10015	

Check type of return to be filed (File a separate application for each return):

☑ Form 990 ☐ Form 990-PF ☐ Form 1041-A ☐ Form 6069
☐ Form 990-BL ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 4720 ☐ Form 8870
☐ Form 990-EZ ☐ Form 990-T (trust other than above) ☐ Form 5227

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

- The books are in the care of ▶ Sharon Hewitt Watkins (Asst. V.P. Finance & Controller)
  Telephone No. ▶ (212) 592-7403 FAX No. ▶ (212) 592-7440
- If the organization does not have an office or place of business in the United States, check this box . . . . ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ________ . If this is for the whole group, check this box . . . . . . ▶ ☐ . If it is for part of the group, check this box. . . . . . ▶ ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until May 15, 20 08

5 For calendar year ______, or other tax year beginning July 1, 20 06, and ending June 30, 20 07.

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension Additional Time needed to complete the 990 as ceratin reporting information not yet finalized.

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

Signature and Verification

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

Signature ▶ Sharon H Watkins Title ▶ Asst. V.P. Finance & Controller Date ▶ 1/24/08

Notice to Applicant. (To Be Completed by the IRS)

☐ We have approved this application. Please attach this form to the organization's return.

☐ **We have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.

☐ **We have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

☐ **We cannot consider** this application because it was filed after the extended due date of the return for which an extension was requested.

☐ Other ________________________________

________________ By: ________________ ________
Director Date

Alternate Mailing Address. Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	**Name**
	Number and street (include suite, room, or apt. no.) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)

Form **8868** (Rev. April 2007) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . ▶ ☑
• If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only . . . . ▶ ☐

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

Electronic Filing (*e-file*). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	**Employer identification number**
File by the due date for filing your return. See instructions.	The New York Public Library, Astor, Lenox and Tilden Foundations	13 1887440
	Number, street, and room or suite no. If a P.O. box, see instructions. 188 Madison Avenue, #5th Floor	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. New York, New York 10016	

Check type of return to be filed (file a separate application for each return):

☑ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

• The books are in the care of ▶ Sharon Hewitt Watkins

Telephone No. ▶ (212) 592-7403 FAX No. ▶ (212) 592-7440

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

1 I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until February 15 , 20 08 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year 20____ or
▶ ☑ tax year beginning July 1, , 20 06 , and ending June 30 , 20 07 .

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

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

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

Signature and Verification

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

Signature ▶ Sharon Watkins Title ▶ Asst. V. P. Finance & Controller Date ▶ 9/14/07