

Return of Organization Exempt From Income Tax

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

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2012** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS		D Employer identification number 13-1505524
	Doing Business As		E Telephone number (212) 358-0640
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 5,075,083.
	536 LA GUARDIA PLACE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, town, or post office, state, and ZIP code NEW YORK, NY 10012		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "No," attach a list. (see instructions)
F Name and address of principal officer: FREDRIC M BELL SAME AS C ABOVE		H(c) Group exemption number ▶	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.AIANY.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1869
			M State of legal domicile: NY

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDING MEMBERSHIP SERVICES AND SCHOLARSHIPS TO THOSE IN THE ARCHITECTURAL PROFESSION.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	19
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	41
	6 Total number of volunteers (estimate if necessary)	6	170
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	74,799.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	0.	0.
	9 Program service revenue (Part VIII, line 2g)	2,202,828.	2,445,865.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	137,543.	87,369.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,161,689.	1,223,428.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,502,060.	3,756,662.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	48,625.	26,225.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,594,055.	1,656,040.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,722,257.	2,062,827.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,364,937.	3,745,092.	
19 Revenue less expenses. Subtract line 18 from line 12	137,123.	11,570.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 6,815,110.	End of Year 7,110,187.
	21 Total liabilities (Part X, line 26)	401,994.	424,961.
	22 Net assets or fund balances. Subtract line 21 from line 20	6,413,116.	6,685,226.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	FREDRIC M BELL, EXECUTIVE DIRECTOR				
Paid Preparer Use Only	Print/Type preparer's name CHRISTOPHER WEIR	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00132471
	Firm's name ▶ MARKS PANETH & SHRON LLP	Firm's EIN ▶ 11-3518842	Firm's address ▶ 685 THIRD AVENUE NEW YORK, NY 10017		
					Phone no. 212 503-8800

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE AIA NEW YORK CHAPTER IS DEDICATED TO THREE GOALS: DESIGN EXCELLENCE, PUBLIC OUTREACH, AND PROFESSIONAL DEVELOPMENT. TO FULFILL ITS MISSION, THE CHAPTER SPONSORS AN ARRAY OF INITIATIVES, PROGRAMS AND EXHIBITIONS THAT EXPLORE TOPICS INTERESTING TO THE

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

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

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

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
SCHOLARSHIP PROGRAMS - FUNDING OF ARCHITECTURE STUDIES, DRAWINGS AND PROJECTS FOR EDUCATIONAL PURPOSES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
GENERAL MEMBERSHIP SERVICES, INCLUDING NEWS LETTER, DIRECTORY OF ARCHITECTURE FIRMS, MARKETING TOOLS, PROFESSIONAL DEVELOPMENT.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
CENTER FOR ARCHITECTURE EXHIBITS AND PROGRAMS: TO IMPROVE THE QUALITY AND SUSTAINABILITY OF THE BUILT ENVIRONMENT, FOSTER EXCHANGE BETWEEN THE DESIGN, CONSTRUCTION, AND REAL ESTATE COMMUNITIES AND TO RAISE THE AWARENESS OF ARCHITECTURE AMONG THE PUBLIC.

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses

Part IV Checklist of Required Schedules

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

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INSTITUTE OF ARCHITECTS

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Part IV Checklist of Required Schedules (continued)

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

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

Form 990 (2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	19	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1b	19	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6	X	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **HENRY ZACHARY - 212-358-0640**
536 LA GUARDIA PLACE, NEW YORK, NY 10012

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOSEPH J. ALIOTTA PRESIDENT/DIR	2.00	X		X			0.	0.	0.	
(2) KENNETH LEVIEN TREAS/DIR	2.00	X		X			0.	0.	0.	
(3) DAVID BURNEY VP/DIR	2.00	X		X			0.	0.	0.	
(4) ABBY P. SUCKLE VP/DIR	2.00	X		X			0.	0.	0.	
(5) MARGARET O'DONOGHUE CASTILLO PAST PRESIDENT/DIR	2.00	X					0.	0.	0.	
(6) MEGAN STERLING CHUSID DIRECTOR	2.00	X					0.	0.	0.	
(7) MARGERY H. PERLMUTTER DIRECTOR	2.00	X					0.	0.	0.	
(8) GERARD GEIER II DIRECTOR	2.00	X					0.	0.	0.	
(9) ANDY FRANKL DIRECTOR	2.00	X					0.	0.	0.	
(10) JESSICA SHERIDAN ASSOCIATE DIRECTOR	2.00	X					0.	0.	0.	
(11) MARYANNE GILMARTIN PUB. DIRECTOR	2.00	X					0.	0.	0.	
(12) JILL N. LERNER PRESIDENT-ELECT/DIR	2.00	X					0.	0.	0.	
(13) KEITH KRUMWIEDE PUB. DIRECTOR	2.00	X					0.	0.	0.	
(14) MATTHEW F. CLARKE DIRECTOR	2.00	X					0.	0.	0.	
(15) UMBERTO DINDO SECRETARY/DIR	2.00	X		X			0.	0.	0.	
(16) LANCE JAY BROWN DIRECTOR	2.00	X					0.	0.	0.	
(17) DAVID PENICK DIRECTOR	2.00	X					0.	0.	0.	

**NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS**

Form 990 (2012)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DAVID PISCUSKAS VP/DIRECTOR	2.00	X		X			0.	0.	0.	
(19) CRAIG SCHWITTER PUB. DIRECTOR	2.00	X					0.	0.	0.	
(20) FREDRIC M. BELL EXECUTIVE DIRECTOR	40.00			X			198,740.	0.	34,288.	
(21) HENRY ZACHARY FINANCE DIRECTOR	20.00			X			0.	0.	0.	
(22) CYNTHIA KRACAUER MANAGING DIRECTOR	40.00					X	144,245.	0.	32,577.	
1b Sub-total							342,985.	0.	66,865.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							342,985.	0.	66,865.	

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

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

Section B. Independent Contractors

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

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

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

NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS

Form 990 (2012)

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Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a MEMBERSHIP DUES		Business Code 900099	1,173,642.	1,173,642.		
	b PROGRAM REVENUE		900099	899,102.	899,102.		
	c PUBLICATIONS		900099	221,053.	5,696.	74,799.	
	d COMMITTEES		900099	152,068.	152,068.		
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			2,445,865.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			87,000.		87,000.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		147,896.					
		b Less: rental expenses	0.				
	c Rental income or (loss)		147,896.				
	d Net rental income or (loss)			147,896.		147,896.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		683,351.					
		b Less: cost or other basis and sales expenses	682,982.				
	c Gain or (loss)		369.				
	d Net gain or (loss)			369.		369.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	1,710,971.				
		b Less: direct expenses	b	635,439.			
c Net income or (loss) from fundraising events			1,075,532.		1,075,532.		
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			3,756,662.	2,230,508.	74,799.	1,451,355.	

**NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS**

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	5,225.			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	21,000.			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	233,028.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,155,035.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20,451.			
9 Other employee benefits	131,555.			
10 Payroll taxes	115,971.			
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	24,000.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	201,242.			
12 Advertising and promotion				
13 Office expenses	117,881.			
14 Information technology	2,925.			
15 Royalties				
16 Occupancy	246,465.			
17 Travel	70,653.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	149,101.			
23 Insurance	17,388.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAMS	366,241.			
b EXHIBITS AND EVENTS	340,300.			
c MAINTENANCE & REPAIRS	163,675.			
d OCULUS EXPENSES	113,782.			
e All other expenses	249,174.			
25 Total functional expenses. Add lines 1 through 24e	3,745,092.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS

Form 990 (2012)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	60,580.	1	151,725.
	2	Savings and temporary cash investments	575,594.	2	280,111.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	10,969.	9	108,316.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,235,409.		
	b	Less: accumulated depreciation	10b 1,870,108.	10c	3,365,301.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	2,585,010.	12	3,092,417.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	208,012.	15	112,317.
16	Total assets. Add lines 1 through 15 (must equal line 34)	6,815,110.	16	7,110,187.	
Liabilities	17	Accounts payable and accrued expenses	151,402.	17	134,812.
	18	Grants payable		18	
	19	Deferred revenue	212,182.	19	182,943.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	38,410.	25	107,206.
	26	Total liabilities. Add lines 17 through 25	401,994.	26	424,961.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	4,611,332.	27	4,673,823.
	28	Temporarily restricted net assets	1,646,438.	28	1,856,057.
	29	Permanently restricted net assets	155,346.	29	155,346.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	6,413,116.	33	6,685,226.
	34	Total liabilities and net assets/fund balances	6,815,110.	34	7,110,187.

Form 990 (2012)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,756,662.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,745,092.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,570.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,413,116.
5	Net unrealized gains (losses) on investments	5	260,540.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,685,226.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2012)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

Open to Public Inspection

▶ **See separate instructions.**

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

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

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

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

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

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

Name of organization NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS	Employer identification number 13-1505524
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2012

LHA

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Part IV Supplemental Information

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS **Employer identification number** 13-1505524

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

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

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- | | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

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

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

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	619,140.	614,287.	569,965.	499,703.	608,825.
b Contributions		15,707.	5,448.		55,997.
c Net investment earnings, gains, and losses	63,920.	-10,804.	39,069.	78,021.	-164,961.
d Grants or scholarships					
e Other expenditures for facilities and programs	5,768.			7,459.	
f Administrative expenses	0.	50.	195.	300.	158.
g End of year balance	677,292.	619,140.	614,287.	569,965.	499,703.

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

- a Board designated or quasi-endowment ▶ 77.06 %
- b Permanent endowment ▶ 22.94 %
- c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		4,245,042.	1,068,025.	3,177,017.
c Leasehold improvements		174,382.	16,578.	157,804.
d Equipment		815,985.	785,505.	30,480.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 3,365,301.

**NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS**

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ML MONEY MARKET	113,186.	END-OF-YEAR MARKET VALUE
(B) FRANKLIN MUTUAL GLOBAL		
(C) FUND	78,565.	END-OF-YEAR MARKET VALUE
(D) BLACKROCK EQUITY FUND	300,793.	END-OF-YEAR MARKET VALUE
(E) INVESCO CHARTER FUND	225,635.	END-OF-YEAR MARKET VALUE
(F) JANUS BALANCED FUND	247,735.	END-OF-YEAR MARKET VALUE
(G) WELLS FARGO GROWTH FUND	329,435.	END-OF-YEAR MARKET VALUE
(H) FRANKLIN INCOME FUND	300,573.	END-OF-YEAR MARKET VALUE
(I)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	3,092,417.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT AND OTHER	
(3) COMMITMENTS	107,206.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	107,206.

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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

PART V, LINE 4: SCHOLARSHIPS AND RESEARCH INTO ISSUES OF PLANNING, URBAN DESIGN, HISTORIC PRESERVATION AND HOUSING OF NEW YORK CITY.

PART X, LINE 2: THE CHAPTER HAS NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2012 IN ACCORDANCE WITH ASC 740, "INCOME TAXES", WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS AND IN RECOGNIZING ANY INTEREST AND PENALTIES. THE CHAPTER IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAX AUTHORITIES

Part XIII Supplemental Information *(continued)*

FOR YEARS BEFORE 2010.

Lined area for supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

OMB No. 1545-0047

2012

Open To Public
Inspection

Name of the organization **NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS** Employer identification number
13-1505524

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

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

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

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total				▶		

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

NEW YORK CHAPTER AMERICAN

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		HERITAGE BALL (event type)	DESIGN AWARDS (event type)	1 (total number)		
Revenue	1	Gross receipts	1,111,842.	418,290.	180,839.	1,710,971.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	1,111,842.	418,290.	180,839.	1,710,971.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	358,214.	183,016.	94,209.	635,439.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				(635,439)
11	Net income summary. Combine line 3, column (d), and line 10				1,075,532.	

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

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

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

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2012

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

Open to Public
Inspection

Name of the organization

NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS

Employer identification number
13-1505524

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

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

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

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

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table
- LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

**NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS**

Schedule I (Form 990) (2012)

13-1505524

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	4	21,000.	0.		

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

SCHEDULE I, PART I, LINE 2: FINAL RESEARCH REPORT BY RECIPIENT OF THE GRANT IS REQUIRED TO BE PRESENTED TO THE NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS UPON COMPLETION OF WORK.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization **NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS** Employer identification number **13-1505524**

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?	4a	<input checked="" type="checkbox"/>								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	<input checked="" type="checkbox"/>								
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<input checked="" type="checkbox"/>								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.										
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a									
b Any related organization?	5b									
If "Yes" to line 5a or 5b, describe in Part III.										
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a									
b Any related organization?	6b									
If "Yes" to line 6a or 6b, describe in Part III.										
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7									
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8									
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

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

Schedule J (Form 990) 2012

NEW YORK CHAPTER AMERICAN
INSTITUTE OF ARCHITECTS

13 - 1505524

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) FREDRIC M. BELL EXECUTIVE DIRECTOR	(i)	173,740.	25,000.	0.	5,250.	233,028.	0.
	(ii)	0.	0.	0.	0.	0.	0.
(2) CYNTHIA KRACAUER MANAGING DIRECTOR	(i)	124,245.	20,000.	0.	3,750.	176,822.	0.
	(ii)	0.	0.	0.	0.	0.	0.
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2012

Open To Public Inspection

Name of the organization **NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS** Employer identification number **13-1505524**

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?		
			To	From			Yes	No	Yes	No	Yes	No	
Total						▶ \$ _____							

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
HENRY ZACHARY	CONSULTANT	89,235.	FINANCE DIR		X

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: HENRY ZACHARY

(D) DESCRIPTION OF TRANSACTION: FINANCE DIRECTOR - HENRY ZACHARY IS AN OWNER OF WICKAPOGUE MANAGEMENT.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization	NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS	Employer identification number 13-1505524
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ARCHITECTURAL PROFESSION, INCLUDING HOUSING, PLANNING, HISTORICAL
PRESERVATION, AND URBAN DESIGN.

THE CHAPTER COORDINATES THE ACTIVITIES OF MORE THAN 24 COMMITTEES AND
PROVIDES SCHOLARSHIP AND EDUCATIONAL OPPORTUNITIES FOR STUDENTS AND THE
GENERAL PUBLIC. EACH YEAR, THE AIA NEW YORK CHAPTER ALSO HOSTS A
DESIGN AWARDS PROGRAM TO RECOGNIZE DESIGN EXCELLENCE IN THREE
CATEGORIES - ARCHITECTURE, INTERIOR ARCHITECTURE AND PROJECTS. IN
ADDITION, THE CHAPTER PUBLISHES A MAGAZINE, OCULUS, AND AN ELECTRONIC
NEWSLETTER, EOCULUS.

FORM 990, PART VI, SECTION A, LINE 6: NEW YORK CHAPTER OF AMERICAN
INSTITUTE OF ARCHITECTS IS A MEMBERSHIP CORPORATION WHICH PROVIDES VARIOUS
SERVICES TO AND ON BEHALF OF ITS MEMBERS, WHO ARE PRIMARILY LICENCED
ARCHITECTS BASED IN THE CITY OF NEW YORK.

FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF DIRECTORS IS ELECTED
BY THE CHAPTER MEMBERSHIP AND ITS NOMINATING COMMITTEE EACH YEAR.

FORM 990, PART VI, SECTION B, LINE 11: THE RETURN IS REVIEWED BY THE
FINANCE COMMITTEE. AFTER THE RETURN IS APPROVED BY THE FINANCE COMMITTEE,
THE RETURN IS SENT TO THE FULL BOARD OF DIRECTORS FOR REVIEW, COMMENT AND
APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS ARE REQUIRED TO
REVIEW AND SIGN THE POLICY AT THE BEGINNING OF EVERY YEAR.

Name of the organization NEW YORK CHAPTER AMERICAN INSTITUTE OF ARCHITECTS	Employer identification number 13-1505524
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FORM 990, PART VI, SECTION B, LINE 15: IN CONCERT WITH THE YEAR-END REVIEWS, EMPLOYEE BASE SALARIES ARE REVIEWED. ADJUSTMENTS FOR COST OF LIVING WILL BE MADE WHEN APPROPRIATE, SUBJECT TO GUIDELINES APPROVED ANNUALLY BY THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
114	COMPUTER	062305	SL	5.00	16	2,371.			2,371.	2,371.		0.
115	COMPUTER	072105	SL	5.00	16	721.			721.	721.		0.
116	EQUIPMENT	072105	SL	5.00	16	617.			617.	606.		0.
117	EQUIPMENT	092905	SL	5.00	16	1,190.			1,190.	1,070.		0.
118	EQUIPMENT	102505	SL	5.00	16	481.			481.	416.		0.
119	PHONE EQUIPMENT	060905	SL	5.00	16	6,232.			6,232.	6,232.		0.
120	PHONE EQUIPMENT	070105	SL	5.00	16	652.			652.	652.		0.
121	COMPUTER EQUIPMENT	012505	SL	5.00	16	109.			109.	109.		0.
122	COMPUTER EQUIPMENT	021105	SL	5.00	16	101.			101.	101.		0.
123	COMPUTER EQUIPMENT	032405	SL	5.00	16	229.			229.	229.		0.
124	COMPUTER EQUIPMENT	041905	SL	5.00	16	209.			209.	209.		0.
125	COMPUTER EQUIPMENT	122905	SL	5.00	16	3,192.			3,192.	3,192.		0.
126	WEBSITE DEVELOPMENT	010107	SL	5.00	16	59,658.			59,658.	55,627.		4,031.
129	COMPUTER EQUIPMENT	042606	SL	5.00	16	1,730.			1,730.	1,730.		0.
130	COMPUTER EQUIPMENT	052506	SL	5.00	16	1,693.			1,693.	1,693.		0.
131	COMPUTER EQUIPMENT	082406	SL	5.00	16	1,622.			1,622.	1,622.		0.
132	COMPUTER EQUIPMENT	082406	SL	5.00	16	1,354.			1,354.	1,354.		0.
133	COMPUTER EQUIPMENT	102606	SL	5.00	16	774.			774.	774.		0.

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
134	FURNITURE & FIXTURES	081006	SL	5.00	16	1,022.			1,022.	1,022.		0.
136	WEBSITE DEVELOPMENT	010109	SL	5.00	16	15,744.			15,744.	13,744.		2,000.
138	COMPUTER EQUIPMENT	060107	SL	5.00	16	10,085.			10,085.	10,085.		0.
139	COMPUTER EQUIPMENT	060107	SL	5.00	16	606.			606.	555.		61.
140	COMPUTER EQUIPMENT	063007	SL	3.00	16	15,769.			15,769.	15,769.		0.
141	COMPUTER EQUIPMENT	123107	SL	3.00	16	4,876.			4,876.	4,876.		0.
142	COMPUTER EQUIPMENT	050911	SL	3.00	16	5,617.			5,617.	1,248.		1,872.
143	WEBSITE DEVELOPMENT	063009	SL	5.00	16	29,590.			29,590.	14,795.		5,918.
144	DONNELLY MECHANICAL CORP.	041910	SL	7.00	16	9,800.			9,800.	2,450.		1,400.
145	DONNELLY MECHANICAL CORP.	110910	SL	7.00	16	9,800.			9,800.	1,633.		1,400.
146	LEASEHOLD IMPROVEMENT	091311	SL	10.00	16	250.			250.	8.		25.
147	LEASEHOLD IMPROVEMENT	112811	SL	10.00	16	2,060.			2,060.	17.		206.
148	LEASEHOLD IMPROVEMENT	120111	SL	10.00	16	58,149.			58,149.	485.		5,815.
149	CO-OP IMPROVEMENTS - GEOTHERMAL	063009	SL	5.00	16	55,935.			55,935.	27,968.		11,187.
150	ALTIERI SEBOR WIEBER LLC	011910	SL	5.00	16	1,894.			1,894.	758.		379.
151	ALTIERI SEBOR WIEBER LLC	022410	SL	5.00	16	1,725.			1,725.	661.		345.
152	ALTIERI SEBOR WIEBER LLC	041910	SL	5.00	16	912.			912.	319.		182.
153	ALTIERI SEBOR WIEBER LLC	041910	SL	5.00	16	35.			35.	12.		7.

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
154	ALTIERI SEBOR WIEBER LLC	062110	SL	5.00	16	6,874.			6,874.	2,177.		1,375.
155	ALTIERI SEBOR WIEBER LLC	062110	SL	5.00	16	1,137.			1,137.	360.		227.
156	ALTIERI SEBOR WIEBER LLC	062110	SL	5.00	16	131.			131.	41.		26.
157	ALTIERI SEBOR WIEBER LLC	071310	SL	5.00	16	345.			345.	104.		69.
158	INTERSTATE WELL & PUMP CO.	081010	SL	5.00	16	3,512.			3,512.	995.		702.
159	ALTIERI SEBOR WIEBER LLC	081710	SL	5.00	16	2,121.			2,121.	601.		424.
160	ALTIERI SEBOR WIEBER LLC	092110	SL	5.00	16	1,150.			1,150.	307.		230.
161	ANDREW BERMAN ARCHITECT	113010	SL	5.00	16	997.			997.	216.		199.
162	ALTIERI SEBOR WIEBER LLC	121610	SL	5.00	16	805.			805.	174.		161.
163	INTERSTATE WELL & PUMP CO.	041511	SL	5.00	16	3,356.			3,356.	503.		671.
164	ALTIERI SEBOR WIEBER LLC	072011	SL	5.00	16	88.			88.	7.		18.
165	ALTIERI SEBOR WIEBER LLC	112811	SL	5.00	16	1,918.			1,918.	32.		384.
166	TECHNICAL GLASS PRODUCTS	011210	SL	39.00	16	2,900.			2,900.	148.		74.
167	ROGER MARVEL	090710	SL	39.00	16	13,127.			13,127.	449.		337.
168	ROGER MARVEL	101810	SL	39.00	16	1,533.			1,533.	49.		39.
169	ROGER MARVEL	123110	SL	39.00	16	3,020.			3,020.	77.		77.
170	ROGER MARVEL	021411	SL	39.00	16	1,109.			1,109.	26.		28.
171	ROGER MARVEL	042611	SL	39.00	16	1,000.			1,000.	17.		26.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
172	ROGER MARVEL	071311	SL	39.00	16	1,935.			1,935.	25.		50.
	LAGUARDIA STUDIO											
173	CON ELEVATOR	063011	SL	39.00	16	30,000.			30,000.	385.		769.
	LAGUARDIA STUDIO											
174	CON ELEVATOR	073111	SL	39.00	16	22,872.			22,872.	244.		586.
	ALTIERI SEBOR											
175	WIEBER LLC	011912	SL	5.00	16	41.			41.			8.
	WILLIAM STOTHOFF CO											
176	INC	041712	SL	5.00	16	13,593.			13,593.			1,699.
	ALTIERI SEBOR											
177	WIEBER LLC	052112	SL	5.00	16	45.			45.			5.
	LEASEHOLD											
178	IMPROVEMENT	063012	SL	10.00	16	113,923.			113,923.			10,023.
	COMPUTER EQUIPMENT											
184	COMPUTER EQUIPMENT	021312	SL	3.00	16	1,826.			1,826.			533.
	COMPUTER EQUIPMENT											
185	COMPUTER EQUIPMENT	031312	SL	3.00	16	2,576.			2,576.			680.
	COMPUTER EQUIPMENT											
186	COMPUTER EQUIPMENT	061212	SL	3.00	16	808.			808.			146.
	COMPUTER EQUIPMENT											
187	COMPUTER EQUIPMENT	081312	SL	3.00	16	2,900.			2,900.			363.
	CO-OP IMPROVEMENTS											
188	CO-OP IMPROVEMENTS	030612	SL	39.00	16	3,744.			3,744.			80.
	* 990 PAGE 10 TOTAL											
	OTHER					546,190.		0.	546,190.	182,050.	0.	54,837.
	PROGRAM SERVICES											
	FURNITURE											
3	FURNITURE	010193	SL	5.00	16	4,184.			4,184.	4,184.		0.
	FURNITURE											
8	FURNITURE	083197	SL	7.00	16	3,933.			3,933.	3,933.		0.
	COMPUTER EQUIPMENT											
12	COMPUTER EQUIPMENT	021699	SL	5.00	16	1,889.			1,889.	1,889.		0.
	COMPUTER EQUIPMENT											
13	COMPUTER EQUIPMENT	041999	SL	5.00	16	1,222.			1,222.	1,222.		0.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
14	COMPUTER EQUIPMENT	071399	SL	5.00	16	624.			624.	624.		0.
15	COMPUTER EQUIPMENT	083099	SL	5.00	16	2,580.			2,580.	2,580.		0.
16	COMPUTER EQUIPMENT	091799	SL	5.00	16	1,832.			1,832.	1,832.		0.
17	EQUIPMENT	101999	SL	5.00	16	433.			433.	433.		0.
18	COMPUTER EQUIPMENT	113099	SL	5.00	16	1,212.			1,212.	1,212.		0.
19	COMPUTER EQUIPMENT	123199	SL	5.00	16	1,058.			1,058.	1,058.		0.
20	534 LA GUARDIA PL. LAND (5 SHARES OF	033099		.000	16	390,970.			390,970.			0.
21	534 LA GUARDIA PL. BLDG (5 SHARES OF	033099	SL	39.00	16	782,055.			782,055.	241,471.		20,053.
23	FURNITURE	021700	SL	7.00	16	524.			524.	524.		0.
26	COMPUTER EQUIPMENT	012600	SL	5.00	16	452.			452.	452.		0.
27	SOFTWARE	012600	SL	3.00	16	878.			878.	878.		0.
29	EQUIPMENT	040500	SL	5.00	16	846.			846.	846.		0.
30	COMPUTER EQUIPMENT	041300	SL	5.00	16	2,933.			2,933.	2,933.		0.
33	COMPUTER EQUIPMENT	101000	SL	5.00	16	5,161.			5,161.	5,161.		0.
34	EQUIPMENT	121200	SL	5.00	16	987.			987.	987.		0.
37	PRINTERS	021301	SL	5.00	16	1,457.			1,457.	1,457.		0.
38	DELL COMPUTER	073101	SL	5.00	16	1,204.			1,204.	1,204.		0.
39	COMPUTER	113001	SL	5.00	16	1,861.			1,861.	1,861.		0.

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
40	COMPUTER EQUIPMENT	0111102SL		5.00	16	400.			400.	400.		0.
41	COMPUTER EQUIPMENT	022602SL		5.00	16	566.			566.	566.		0.
42	COMPUTER EQUIPMENT	031202SL		5.00	16	918.			918.	918.		0.
43	PRINTERS	042502SL		5.00	16	316.			316.	316.		0.
44	COMPUTER EQUIPMENT	052402SL		5.00	16	352.			352.	352.		0.
45	PRINTERS	062502SL		5.00	16	504.			504.	504.		0.
46	SOFTWARE	071802SL		3.00	16	925.			925.	925.		0.
47	COMPUTER EQUIPMENT	071802SL		5.00	16	223.			223.	223.		0.
48	COMPUTER	081902SL		5.00	16	2,675.			2,675.	2,675.		0.
49	536 LA GUARDIA PL. IMPROVEMENTS	091503SL		39.00	16	2359964.			2359964.	581,495.		60,512.
50	FURNITURE & FIXTURES	091503SL		7.00	16	47,005.			47,005.	47,005.		0.
51	FURNITURE & FIXTURES	091503SL		7.00	16	33,017.			33,017.	33,017.		0.
52	FURNITURE & FIXTURES	091503SL		7.00	16	38,166.			38,166.	38,166.		0.
53	FURNITURE & FIXTURES	100103SL		7.00	16	52,967.			52,967.	52,967.		0.
54	FURNITURE & FIXTURES	110103SL		7.00	16	21,498.			21,498.	21,498.		0.
55	FURNITURE & FIXTURES	123103SL		7.00	16	5,117.			5,117.	5,117.		0.
56	AUDIO VISUAL EQUIP.	091503SL		5.00	16	3,010.			3,010.	2,985.		0.
57	AUDIO VISUAL EQUIP.	091503SL		5.00	16	2,214.			2,214.	2,196.		0.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
58	AUDIO VISUAL EQUIP.	091503SL	SL	5.00	16	59,862.			59,862.	59,762.		0.
59	AUDIO VISUAL EQUIP. & EQUIPMENT	091503SL	SL	5.00	16	1,588.			1,588.	1,577.		0.
60	INSTALLATION COMMUNICATION	091503SL	SL	5.00	16	24,948.			24,948.	24,948.		0.
61	EQUIPMENT	100803SL	SL	5.00	16	25,818.			25,818.	25,818.		0.
62	AUDIO VISUAL EQUIP.	103103SL	SL	5.00	16	94,452.			94,452.	94,452.		0.
63	AUDIO VISUAL EQUIP.	111803SL	SL	5.00	16	3,785.			3,785.	3,785.		0.
64	AUDIO VISUAL EQUIP.	123103SL	SL	5.00	16	24.			24.	24.		0.
65	COMPUTER	091503SL	SL	5.00	16	19,982.			19,982.	19,814.		0.
66	COMPUTER	091503SL	SL	5.00	16	5,375.			5,375.	5,331.		0.
67	COMPUTER	100103SL	SL	5.00	16	7,355.			7,355.	7,355.		0.
68	COMPUTER	111803SL	SL	5.00	16	3,340.			3,340.	3,340.		0.
69	COMPUTER	120103SL	SL	5.00	16	1,156.			1,156.	1,156.		0.
70	DISHWASHER	091503SL	SL	5.00	16	962.			962.	952.		0.
71	ICEMAKER & MICROWAVE	091503SL	SL	5.00	16	1,507.			1,507.	1,493.		0.
72	REFRIGERATORS	091503SL	SL	5.00	16	2,576.			2,576.	2,553.		0.
73	VACUUM CLEANER	091503SL	SL	5.00	16	359.			359.	359.		0.
74	DGA SECURITY SYSTEM	091503SL	SL	5.00	16	6,492.			6,492.	6,492.		0.
75	PHONE EQUIPMENT	091503SL	SL	5.00	16	22,795.			22,795.	22,605.		0.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
76	ROUTER	091503	SL	5.00	16	800.			800.	794.		0.
77	PHONE EQUIPMENT	100103	SL	5.00	16	3,683.			3,683.	3,683.		0.
78	COMPUTER EQUIPMENT	061503	SL	5.00	16	261.			261.	261.		0.
79	COMPUTER EQUIPMENT	101503	SL	5.00	16	2,007.			2,007.	1,989.		0.
80	COMPUTER EQUIPMENT	121503	SL	5.00	16	393.			393.	393.		0.
81	536 LA GUARDIA PL. IMPROVEMENTS	011904	SL	39.00	16	1,385.			1,385.	285.		36.
82	536 LA GUARDIA PL. IMPROVEMENTS	060104	SL	39.00	16	12,562.			12,562.	2,442.		322.
83	536 LA GUARDIA PL. IMPROVEMENTS	021004	SL	39.00	16	2,258.			2,258.	459.		58.
84	FURNITURE & FIXTURES	030104	SL	7.00	16	3,910.			3,910.	3,910.		0.
85	SECURITY SYSTEM	041304	SL	7.00	16	16,758.			16,758.	16,758.		0.
86	AUDIO VISUAL EQUIP.	022404	SL	5.00	16	3,500.			3,500.	3,500.		0.
87	AUDIO VISUAL EQUIP.	060204	SL	5.00	16	20,190.			20,190.	20,190.		0.
88	COMPUTER	010804	SL	5.00	16	3,136.			3,136.	3,136.		0.
89	COMPUTER	051504	SL	5.00	16	8,371.			8,371.	8,371.		0.
90	COMPUTER	111104	SL	5.00	16	2,707.			2,707.	2,707.		0.
91	EQUIPMENT	081704	SL	5.00	16	925.			925.	925.		0.
92	FURNITURE	093004	SL	7.00	16	350.			350.	350.		0.
93	LAMINATOR	042904	SL	5.00	16	326.			326.	326.		0.

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05-01-12

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
94	TELEVISION & DVD	072004	SL	5.00	16	10,534.			10,534.	10,534.		0.
95	LCD PROJECTOR	101204	SL	5.00	16	1,959.			1,959.	1,959.		0.
96	536 LA GUARDIA PL. IMPROVEMENTS	031804	SL	39.00	16	1,167.			1,167.	232.		30.
97	536 LA GUARDIA PL. IMPROVEMENTS	061504	SL	39.00	16	19,750.			19,750.	3,837.		506.
98	536 LA GUARDIA PL. IMPROVEMENTS	030404	SL	39.00	16	43,000.			43,000.	8,640.		1,103.
99	536 LA GUARDIA PL. IMPROVEMENTS	113004	SL	39.00	16	301,796.			301,796.	54,811.		7,738.
100	536 LA GUARDIA PL. IMPROVEMENTS	122004	SL	39.00	16	100,000.			100,000.	17,948.		2,564.
101	536 LA GUARDIA PL. IMPROVEMENTS	123104	SL	39.00	16	14,438.			14,438.	2,590.		370.
102	EQUIPMENT	031804	SL	5.00	16	328.			328.	328.		0.
103	FURNITURE & FIXTURES	093004	SL	7.00	16	1,209.			1,209.	1,209.		0.
104	FURNITURE & FIXTURES	021004	SL	7.00	16	2,200.			2,200.	2,185.		0.
105	FURNITURE & FIXTURES	113004	SL	7.00	16	434.			434.	434.		0.
106	FURNITURE & FIXTURES	042704	SL	7.00	16	5,353.			5,353.	5,353.		0.
107	FURNITURE & FIXTURES	123104	SL	7.00	16	3,120.			3,120.	3,120.		0.
108	536 LA GUARDIA PL. IMPROVEMENTS	010305	SL	39.00	16	1,304.			1,304.	231.		33.
109	536 LA GUARDIA PL. IMPROVEMENTS	053105	SL	39.00	16	30,000.			30,000.	5,063.		769.
110	536 LA GUARDIA PL. IMPROVEMENTS	063005	SL	39.00	16	6,542.			6,542.	1,092.		168.
111	AUDIO VISUAL EQUIP.	012505	SL	5.00	16	527.			527.	527.		0.

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05-01-12

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
112	COMPUTER SOFTWARE	012505	SL	5.00	16	1,288.			1,288.	1,288.		0.
113	COMPUTER	021105	SL	5.00	16	241.			241.	241.		0.
	* 990 PAGE 10 TOTAL											
	PROGRAM SERVICES					4689220.		0.	4689220.	1541983.	0.	94,262.
	* GRAND TOTAL 990											
	PAGE 10 DEPR					5235410.		0.	5235410.	1724033.	0.	149,099.