Form **990-EZ**

Short Form 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)

at the end of the year may use this form.

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000

2012

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

10 Grants and similar amounts paid (list in Schedule O) 10 0 0	Inte	ernal Reve	nue Service	► The organization may have	to use a copy of this return	to satisfy state	reporting requi	rements.			
Name starage Nam	Α	For the	2012 calenda		07/01	, 2012,	and ending	00	6/30	, 20) 13
Number and steeker for Po. box. Final is not delivered to street address)	В	Check if ap	pplicable:	C Name of organization			· · · · · · · · · · · · · · · · · · ·	D Employ	er iden	ntification num	ber
Internation Amendation A		Address o	change	ARDEA ARTS INC					20-	4937547	
Terminated Annotated trains Application pending Application Appli	Н		*	Number and street (or P.O. box, if ma	ail is not delivered to street add	dress)	Room/suite	E Telepho	one nun	nber	
Aprication remaining New York, NY 10013-2695	H								212-	-431-7039	
Accounting Method:				City or town, state or country, and Zi	P + 4			F Group	Exem	ption	
WebSite: ► www.ardeaearts.com Take-vempt status (check only ne) = 501(c)(3) 501(c)() 4 (insert no.) 4447(a)(1) or 527 (from 990, 990-FE). (Prom 990-FE). (Pro		Applicatio	on pending	New York, NY 10013-2695				Numb	er 🕨		
Tax-exempt status (check only one)	G	Account	ting Method:	Cash Accrual Oth	er (specify) 🕨		Н	Check ►	☐ if t	the organizati	on is not
K Check If the organization is not a section 590(kg) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, Illine 25, octume (P) below) are \$500,000 or more, if it is asset (Part II, Illine 25, octume (P) below) are \$500,000 or more, if it is asset (Part II, Illine 25, octume (P) below) are \$500,000 or more, if it is asset (Part II, Illine 25, octume (P) below) are \$500,000 or more, or if total assets (Part II, Illine 25, octume (P) below) are \$500,000 or more, or if total assets (Part II, Illine 25, octume (P) below) are \$500,000 or more, or if it tal assets (Part II, Illine 25, octume (P) below) are \$500,000 or more, or if it tal assets (Part II, Illine 25, octume (P) below are \$500,000 or more, or if total assets (Part II, Illine 25, octume (P) below are \$500,000 or more, or if total assets (Part II, Illine 25, octume (P) below are \$500,000 or more, or if total assets (Part II, Illine 25, octume (P) below are seven	ı	Websit	te: ► www.	ardeaarts.com				required t	o attac	ch Schedule E	3
not more than \$50,00.0. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (8) below) are \$500,000 or more, file Form 990-EZ Part II Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received. 1 1 90,275 2 Program service revenue including government fees and contracts 2 2 Program service revenue including government fees and contracts 3 0 0 4 Investment income 4 Investment income 5 Gross amount from sale of assets other than inventory 5 Ba 0 5 Less: cost or other basis and sales expenses. 5 C Gaming and fundraising events 6 Gaming and fundraising events 8 Gross income from gaming (attach Schedule G if greater than \$15,000) C Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7 B Gross sales of inventory, less returns and allowances 7 C Gossprofit or (loss) from sales of inventory (Subtract line 7a) 8 Other revenue (describe in Schedule O) 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to closs) from sales of inventory (Subtract line 7a) 7 C 0 8 Other revenue (describe in Schedule O) 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 13 11,588 14 Coupancy, rent, utilities, and maintenance 14 4 404 15 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	J	Tax-exen	mpt status (che	eck only one) — 🔽 501(c)(3) 🗌 5	601(c) () ◀ (insert no.) [4947(a)(1) or	<u>527</u>	(Form 990), 990-	EZ, or 990-PF	=).
the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, octumn (5) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	K	Check •	▶ ☐ if the	e organization is not a section 509	(a)(3) supporting organization	n or a section	527 organizati	on and its	gross r	receipts are n	ormally
Part		not mor	re than \$50,00	0. A Form 990-EZ or Form 990 re	turn is not required though	Form 990-N (e	e-postcard) ma	ay be requi	red (se	ee instructions	s). But if
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Pa	Balance Sheets (see the instructions f	,		5		
	Check if the organization used Schedule	O to respond to ar	ny question in this			(D) End of year
00	Cook assisses and investments		-	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			58,723		13,059
23	Land and buildings				23 24	0
24 25				58,723	_	13.050
26	Total assets			62,838	-	13,059
27	Net assets or fund balances (line 27 of column			-4,115	_	25,903 -12,844
	t III Statement of Program Service Accom	· , •	, , , , , , , , , , , , , , , , , , ,		21	-12,044
	Check if the organization used Schedule	•		•	(D	Expenses
Wha		See Schedule O, Sta	• •			uired for section c)(3) and 501(c)(4)
	cribe the organization's program service accomplis	•		rogram convices	orgai	nizations and section
	neasured by expenses. In a clear and concise m					(a)(1) trusts; optional thers.)
	ons benefited, and other relevant information for ea		o con vices provided	, the name of	101 0	iners.)
28	Maya's Ark: Maya's Ark integrates the musical art for	rm of opera with a sto	ory layered with mean	ning. Based on		
	a true story from inner-city Newark, NJ, the mini-ope					
	(Continued on Schedule O, Statement 3)					
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .	▶ 🗆	28a	2,171
29	The Three Astronauts: This new-wave opera is curre	ently under developm	ent and will be perfor	rmed in		
	2015-2016 season, in partnership with The Santa Fe	Opera. Our purpose i	s to engage multiger	nerational		
	(Continued on Schedule O, Statement 4)					
		includes foreign gra			29a	24,869
30	Ardea Artist Salon Series: The Ardea Artist Salon pro					
	audiences through the sharing of creative processes	s and by fostering dis	cussion and commu	nity building.		
	(Continued on Schedule O, Statement 5)					
~4	,	includes foreign gra	nts, check here .	▶ ⊔	30a	1,100
31	Other program services (describe in Schedule O)_	in alicela a favoriaria arra		· · · · · · · ·	04-	
32	(Grants \$ 0) If this amount Total program service expenses (add lines 28a t	includes foreign gra			31a 32	0
	List of Officers, Directors, Trustees, and Key					28,140
ıaı	Check if the organization used Schedule			•		
	Chook ii the organization assa constatie		(c) Reportable	(d) Health benefits,	Τ.	
	(a) Name and title	(b) Average hours per week	compensation (Forms W-2/1099-MISC)	contributions to employ benefit plans, and		Estimated amount of ther compensation
		devoted to position	(if not paid, enter -0-)	deferred compensation		and dempendation
Gret	he Barrett Holby	40				_
Exe	cutive & Artistic Director		6,438		0	0
Patr	cia Herrmann Deans	5	0		_	0
Trea	surer		0		0	0
Rayı	mond Wetmore	5	0		0	0
Mem	ber	_	•		<u> </u>	
Ibiay	ri Briggs	5	0		0	0
	etary	16			_	
	li Ozieh	-	28,865		0	0
	f Financial Officer	10				
	shall Ford	-	17,543			
Proj	ect Manager				+	
		-				
		-				
		1				
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		-				
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Other Information (Note the Schedule A and personal benefit contract statement requirements in the Part V instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V Yes No 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a 33 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the 34 Did the organization have unrelated business gross income of \$1,000 or more during the year from business 35a 35a If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36 Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ | 37a | 37a 37b 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? ... 38a 1 If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 39 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 39a Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4955 ► 0 ; section 4912 ► Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b / Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter List the states with which a copy of this return is filed ► NY 41 42a The organization's books are in care of ► Chidi Ozieh Telephone no. ▶ 212-431-7039 Located at ► 463 Broome Street, New York, NY 10013 ZIP + 4 ▶ 10013 **b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes No a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here 43 and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be 44a Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be 44b If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an 44d 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of 45b

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				(d) H	lealth be	enefits,			
(a)	paid more than \$100,000	hours per week	compensation	hanafit n					
		devoted to position	(Forms W-2/1099-MIS	co	mpensa	ation			
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				ent contrac	tors v	who each	n received	d more	thar
	· · · · · · · · · · · · · · · · · · ·								
Name a	nd address of each independent contractor paid	d more than \$100,000	(b) Type of s	service		(c)) Compensa	tion	
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	Signature of officer				Date				
	, 31	Droporovia sieve-tum-	Г	Date			DTIN		
	Print/Type preparer's name	Preparer's signature		⊔ate		Check Self-emplo	l if	145775	20
		LIC.			Eine-1	· · · ·			აგ
Only	, ,		 1						
e IRS									No
	Did the to can the to	Total number of other employees paid over Complete this table for the organization's \$100,000 of compensation from the organization complete this table for the organization's \$100,000 of compensation from the organization contractor paid in the organization of preparer (other than \$100,000 of complete this table for the organization's \$100,000 of compensation from the organization of preparer (other than be organization) of preparer (other than \$100,000 of compensation of \$100,000 of compensat	Did the organization engage, directly or indirectly, in political of to candidates for public office? If "Yes," complete Schedule C, Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer que 50 and 51 Check if the organization used Schedule O to respond Did the organization engage in lobbying activities or have a syear? If "Yes," complete Schedule C, Part II Is the organization a school as described in section 170(b)(1)(A)(ii Did the organization make any transfers to an exempt non-cha If "Yes," was the related organization a section 527 organizatio Complete this table for the organization's five highest compen employees) who each received more than \$100,000 of comper (a) Name and title of each employee paid more than \$100,000 (b) Average hours per week devoted to position Total number of other employees paid over \$100,000	Did the organization engage, directly or indirectly, in political campaign activities to candidates for public office? If "Yes," complete Schedule C, Part I	Did the organization engage, directly or indirectly, in political campaign activities on behalf to candidates for public office? If "Yes," complete Schedule C, Part 1	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47–49b and 52, and com 50 and 51 Check if the organization used Schedule O to respond to any question in this Part VI Did the organization engage in lobbying activities or have a section 501(h) election in effect diverse? If "Yes," complete Schedule C, Part II Is the organization aschool as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization make any transfers to an exempt non-charitable related organization? . If "Yes," was the related organization is five highest compensated employees (other than office employees) who each received more than \$100,000 of compensation from the organization. If the employee paid more than \$100,000 of compensation from the organization. If there is none, enter "None." Total number of other employees paid over \$100,000 (b) Average house per week devoted to position (femis W-2/1099-MISC)	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposite to candidates for public office? If "Yes," complete Schedule C, Part 1. Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the 50 and 51 Coheck if the organization used Schedule O to respond to any question in this Part VI Did the organization engage in lobbying activities or have a section 501(h) election in effect during the year? If "Yes," complete Schedule C, Part II Is the organization as chool as described in section 17(b)(1)(A)(A)(ii)? If "Yes," complete Schedule E Is the organization as chool as described in section 17(b)(1)(A)(iii)? If "Yes," complete Schedule E If "Yes," was the related organization as earth one-charitable related organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization as section 527 organization? If "Yes," was the related organization in the organization of the highest compensated employees (other than officers, direct employees) who search received more than \$100,000 of the organization. If there is no one organization in the organization of the organization organiza	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 1	Dot the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 1

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization **Employer identification number** ARDEA ARTS INC 20-4937547 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II **c** Type III–Functionally integrated **d** Type III–Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No Yes 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iv) Is the organization (v) Did you notify (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary (vi) Is the organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support col. (i) of your governing document? (i) organized in the above or IRC section support? U.S.? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E)

Total

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 **(e)** 2012 (f) Total contributions, 1 grants, membership fees received. (Do not include any "unusual grants.") . . . 58,816 49,277 24,047 103,550 90,275 325,965 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 Total. Add lines 1 through 3. . . . 4 58,816 49.277 24,047 103,550 90,275 325,965 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4. 325,965 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 7 Amounts from line 4 24,047 90,275 58,816 49,277 103,550 325,965 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 56 12 1,226 1,305 6 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 2.842 850 10,407 2,315 8,269 24,683 **Total support.** Add lines 7 through 10 11 351,953 Gross receipts from related activities, etc. (see instructions) 12 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 92.62 % 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2011 Schedule A, Part II, line 14 15 331/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ 331/3% support test-2011. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

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

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

C +:	and Dublic Comment	andor the to	oto notou bon	ow, pioaco oc	inploto i ait	,	
	on A. Public Support	() 0000	4 > 0000	() 0010	(1) 0044	() 0040	(A T
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
3	organization's tax-exempt purpose Gross receipts from activities that are not an						
J	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						_
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
-	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	e organization	's first secon	d third fourth	or fifth tay w	ear as a sectio	n 501(c)(3)
17	organization, check this box and stop he	•					. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3, column (f))		15	%
16	Public support percentage from 2011 Sch						%
	on D. Computation of Investment In						
17	Investment income percentage for 2012 (y line 13, colui	mn (f))	17	%
18	Investment income percentage from 2011			-			%
19a	331/3% support tests-2012. If the organ						
	17 is not more than $33^{1}/_{3}\%$, check this box	and stop here .	. The organizati	on qualifies as	a publicly supp	orted organizati	on . ▶ 🗌
b	331/3% support tests—2011. If the organiz						
	line 18 is not more than 331/3%, check this l	_	_				_
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🗌

Part IV

	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
General Exp	lanation - Other income includes Inexpensive Studio Rentals to artists and other Not for Profit organizations, & miscellaneous
Revenue	

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;

SCHEDULE L (Form 990 or 990-EZ)

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

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

2 3 3 3 3 3 3 3	ARDI	EA ARTS INC									20-4	19375	47			
(a) Name of interested person (b) Relationship (c) Description of transaction Yes No Ye	Par										0-EZ,	Part	V, line	40b.		
Secretary Secr	4	(a) Name of disqualified	noroon	(b) Relationship be	etween c	disqualified	person and		(a) Description	on of tra	naaatia			(d) Cor	rected?	
2 3 3 3 3 3 3 3	'	(a) Name of disquaimed	person		organiza	ation			(c) Description	on or tra	isaciioi			Yes	No	
33 40 50 50 50 50 50 50 50	(1)															
Age September Age	(2)															
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 incurred by the organization managers or disqualified persons during the year under section 4958	(4)															
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	(5)															
under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization 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 propertied an amount on Form 990, Part IV, line 38a or Form 990, Part IV, line 26; or if the organization propertied an amount on Form 990, Part IV, line 38a or Form 990, Part IV, line 26; or if the organization or propertied an amount on Form 990, Part IV, line 38a or Form 990, Part IV, line 26; or if the organization or propertied an amount or form the organization or propertied an amount organization organizati	(6)															
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 organization? To From (e) Original principal amount (f) Balance due (g) In default? (h) Approved by board or agreement? Committee (c) Purpose of loan (d) Loan to organization? To From (e) Original principal amount (e) Purpose of loan (e) Purpose of assistance (e) Purpose of assistance (e) Purpose of assistance (e) Purpose of assistance (f) Purpos		under section 4958	3							_	-	• \$				
Complete if the organization answered "Yes" on 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 Ioan (d) Lorent Tourn organization? To From F			i tax, ii ariy, ori	iiile 2, above,	TellTib	urseu by	r trie organi	ızatıoı		• •	'		·			
with organization loan		Complete if the organization r	ne organization reported an amo	answered "Ye ount on Form !	s" on I 990, Pa	art X, line	e 5, 6, or 2	2.							ritton	
1 Sch L, Stmt 1	(a) N			loan from the		m the					(g) in deladit:		by board or			
2					То	From				Yes	No	Yes	No	Yes	No	
3		Sch L, Stmt 1														
4	(2)															
Solution	(3)															
66	(4)															
7) 88 99 90 90 90 90 90 90	(5)															
88 99 90 90 90 90 90 90 90 90 90 90 90 90	(6)															
Section Sect	(7)															
tart 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 (1) (2) (3) (4) (5) (6) (7) (8)	(8)															
Tart 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 (1) (2) (3) (4) (4) (5) (6) (7) (8)	(9)															
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 (1) (2) (3) (4) (5) (6) (7) (8)	(10)															
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 (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	Total							<u>. ▶</u>	\$ 46,85	6						
1)	Part	Grants or Ass Complete if the					0, Part IV, I	ine 27	7.							
(2) (3) (4) (5) (6) (7) (8) (6)	(a)	Name of interested person				(c) Amount	of assistance		(d) Type of assistan	ice	(e)) Purpo	ose of a	ssistan	ce	
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(3) (4) (5) (6) (7) (8)	(2)															
(4) (5) (6) (7) (8)	(3)															
(5) (6) (7) (8)																
(6) (7) (8)	(5)															
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(8)	(7)															
	(8)															
9)	(9)															
	(10)															
	(10)		1					1			1					

Schedule L	(Form 990 or 990-EZ) 2012				P	age ∠	
Part IV	Business Transactions Invol Complete if the organization a	Iving Interested Persons. answered "Yes" on Form 990	, Part IV, line 28a, 2	8b, or 28c.			
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	nount of (d) Description of transaction			
					Yes	No	
(1)					100		
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
Part V	Supplemental Information				!	•	
	Complete this part to provide	additional information for res	sponses to question	is on Schedule L (see instructio	ns).		

Schedule L, Part V, Statement 1

Form: Schedule L

Page: 1

Line Number: Part II

ARDEA ARTS INC 20-4937547

Description of Loans to and/or From Interested Persons

Name of interested person	Relationship with organization	Purpose of Ioan	Loan to Loan fr.	OPA	Due Dflt.	Appr.	Writt.
Grethe Barrett Holby	Executive & Artistic Director	Operation	Yes	50,000	46,856 No	Yes	Yes

Total: 46,856

Loan to = Loan to organization? Loan fr. = Loan from organization? OPA = Original principal amount

Due = Balance due Dflt. = In default?

Appr. = Approved by board or committee?

Writt. = Written agreement?

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number Name of the organization **ARDEA ARTS INC** 20-4937547 Form 990-EZ, Part I, Line 8 - Other income includes Studio rentals & miscellaneous income Form 990-EZ, Part I, Line 16 - Other expenses include: Travels & Meetings, Insurance, Supplies, telephone, bank fees, marketing, other fees, development expenses, Form 990-EZ, Part II, Line 26 - This include account payable, loan from Artistic Director & payroll liabilities Form 990-EZ, Part III, Line (28-31) - There are three major accomplishments with details provided in line 28+ Form 990-EZ, Part III, Line 32 - Total expenses for the three major accomplishments are detailed in line 32

Schedule O, Statement 1
Form: 990-EZ
ARDEA ARTS INC
20-4937547

Form: 990-EZ Page: 1 Line Number:

Reasonable Cause Explanations

Explanation

The reasons for late filing are: 1. One of the officers who is responsible to authenticate the form was on vacation 2. Most key officers work on parttime bases, which cause delays in providing some required supporting documentation to the tax consultant assigned to this engagement by Guaranty Consulting LLC.

Page: 1

Schedule O, Statement 2
Form: 990-EZ
ARDEA ARTS INC
20-4937547

Form: 990-EZ Page: 2

Line Number: Part III

Primary Exempt Purpose

Primary Exempt Purpose

ARDEA ARTS MISSION STATEMENT: Ardea Arts ("New Opera for New Audiences") is a not-for-profit development and producing company dedicated to creating and performing new opera and music-theater works of the highest professional quality, which challenge as well as entertain, speak to our diverse global community and champion the human spirit. Our commitment extends to global audiences of all ages and from all walks of life. We bring together unexpected artists to redefine and revitalize opera for the twenty-first century. Our goal is to create work that brings new audiences and new generations to opera, and that travels into diverse communities to engage people and their communities both within and far outside the walls of the opera house.

Schedule O, Statement 3
Form: 990-EZ
20-4937547

Form: 990-EZ Page: 2

Line Number: Part III Line 28

First Program Service Accomplishments Description

Description

that we can often learn the most from the least likely people, and when we least expect it. To reach the broadest audience, this short opera was filmed. The premiere was free and open to the public, performed in a church behind the NYC Port Authority, a depressed and undeserved neighborhood. 138 people attended from all walks of life, including drug addicts, homeless people, artists, people from the neighborhood, opera lovers, donors, community and religious leaders. The presentation was presented both on film and with live musicians and singers, followed by a deeply moving discussion engaging the full and diverse audience, as they shared their thoughts triggered by the opera and its themes. It is our hope that this cross-cultural discussion will continue in the communities in which we present this opera, long after we have left. We look forward to receiving funding that will allow more of these open performances and sharing of ideas. Five artists were hired for the performance. Four artists were hired to create the opera, and ten artists were hired to make the film. In addition, an important new work was born.

Schedule O, Statement 4
Form: 990-EZ
20-4937547

Form: 990-EZ Page: 2

Line Number: Part III Line 29

Second Program Service Accomplishments Description

Description

audiences in communities across the country, introduce STEM initiatives in an entertaining and deeply engrossing manner, interest the next generation in Space Exploration, and explore how we might begin to communicate across our differences, both here in the United States, and also as global citizens. 3 cultures, 3 languages: American, Chinese, Russian, 8 international artists explore such questions as "What is Alien?" & "How do we forge Friendships & Alliances across cultural & language barriers, and bridge an abyss of difference with an Ultimate Other?" 3 Astronauts struggle to work together to survive on Mars until an ultimate other unites them first as humans, and then as ambassadors. The story promises to entertain, challenge, and inspire audiences of all ages and cultures. The Premiere will be produced in collaboration with The Santa Fe Opera in 2015. Children from local communities will participate in the Children's Chorus, learning music, poetry, and responsibility from extraordinary professional artists, as well as preforming for their community.

Schedule O, Statement 5
Form: 990-EZ
ARDEA ARTS INC
20-4937547

Form: 990-EZ Page: 2

Line Number: Part III Line 30

Third Program Service Accomplishments Description

Description

With this quarterly program we introduce new audiences to the art of making opera. Entrance to the salons is by voluntary donation. One particularly successful salon this fiscal year centered on the work of Pulitzer Prize winning American poet Yusef Komunyakaa, with a live performance of his jazz opera, Testimony, a tribute to Charlie Parker. In addition, he read a number of his extraordinary American poems, and he discussed the background and profile of the American astronaut he has created for our new opera, The Three Astronauts.