

Form 990
Department of the Treasury
Internal Revenue Service

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)

OMB No 1545-0047

2007

Open to Public Inspection

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

A For the 2007 calendar year, or tax year beginning 07-01-2007 and ending 06-30-2008

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

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

C Name of organization THE CARNEGIE HALL CORPORATION
Number and street (or P O box if mail is not delivered to street address) Room/suite 881 Seventh Avenue
City or town, state or country, and ZIP + 4 New York, NY 10019

D Employer identification number 13-1923626
E Telephone number (212) 903-9600
F Accounting method Cash Accrual Other (specify)

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

G Web site: www.carnegiehall.org

J Organization type (check only one) 501(c)(3) (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 76,265,514

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes" enter number of affiliates
H(c) Are all affiliates included? Yes No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number
M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events and activities, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets or fund balances at beginning of year, Other changes in net assets or fund balances, Net assets or fund balances at end of year.

**Part II Statement of Functional Expenses**

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
<b>22a</b>	Grants paid from donor advised funds (attach Schedule) (cash \$ <sup>0</sup> _____ noncash \$ <sup>0</sup> _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>				
<b>22b</b>	Other grants and allocations (attach schedule) (cash \$ <sup>0</sup> _____ noncash \$ <sup>0</sup> _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>				
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>				
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>				
<b>25a</b>	Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	<b>25a</b>	1,445,474	1,200,322	245,152	
<b>b</b>	Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule)	<b>25b</b>				
<b>c</b>	Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	<b>25c</b>				
<b>26</b>	Salaries and wages of employees not included on lines 25a, b and c	<b>26</b>	19,289,086	16,018,308	3,270,778	
<b>27</b>	Pension plan contributions not included on lines 25a, b and c	<b>27</b>				
<b>28</b>	Employee benefits not included on lines 25a - 27	<b>28</b>	5,370,886	3,149,216	2,221,670	
<b>29</b>	Payroll taxes	<b>29</b>				
<b>30</b>	Professional fundraising fees	<b>30</b>				
<b>31</b>	Accounting fees	<b>31</b>	135,000		135,000	
<b>32</b>	Legal fees	<b>32</b>	143,312		143,312	
<b>33</b>	Supplies	<b>33</b>	297,104	173,942	123,162	
<b>34</b>	Telephone	<b>34</b>	295,764	8,062	287,702	
<b>35</b>	Postage and shipping	<b>35</b>	47,686	2,236	45,450	
<b>36</b>	Occupancy	<b>36</b>	512,400	512,400		
<b>37</b>	Equipment rental and maintenance	<b>37</b>				
<b>38</b>	Printing and publications	<b>38</b>	182,667	168,006	14,661	
<b>39</b>	Travel	<b>39</b>	365,825	134,176	231,649	
<b>40</b>	Conferences, conventions, and meetings	<b>40</b>				
<b>41</b>	Interest	<b>41</b>	59,385		59,385	
<b>42</b>	Depreciation, depletion, etc. (attach schedule)	<b>42</b>	6,633,303	6,633,303		
<b>43</b>	Other expenses not covered above (itemize)					
<b>a</b>	See Additional Data Table	<b>43a</b>				
<b>b</b>		<b>43b</b>				
<b>c</b>		<b>43c</b>				
<b>d</b>		<b>43d</b>				
<b>e</b>		<b>43e</b>				
<b>f</b>		<b>43f</b>				
<b>g</b>		<b>43g</b>				
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	61,553,762	52,916,304	8,637,458	0

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$<sup>0</sup> \_\_\_\_\_, (ii) the amount allocated to Program services \$<sup>0</sup> \_\_\_\_\_, (iii) the amount allocated to Management and general \$<sup>0</sup> \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$<sup>0</sup> \_\_\_\_\_

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

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

What is the organization's primary exempt purpose? <b>▶ THE CARNEGIE HALL CORPORATION'S MISSION IS TO PRESENT EXTRAORDINARY MUSIC AND MUSICIANS ON THE THREE STAGES OF THIS LEGENDARY HALL, TO BRING THE TRANSFORMATIVE POWER OF MUSIC TO THE WIDEST POSSIBLE AUDIENCE, TO PROVIDE VISIONARY EDUCATION PROGRAMS, AND TO FOSTER THE FUTURE OF MUSIC THROUGH THE CULTIVATION OF NEW WORKS, ARTISTS, AND AUDIENCES</b>	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others )
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) <b>a</b> CARNEGIE HALL CORPORATION SPONSORED EVENTS - PRESENTATION OF CONCERTS AND PERFORMANCES BY THE CORPORATION TO ENCOURAGE THE DEVELOPMENT OF TALENT IN MUSIC RELATED ARTS  (Grants and allocations \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	30,957,607
<b>b</b> HALL RENTAL OPERATIONS - LEASING AND MANAGING CARNEGIE HALL AS AN AUDITORIUM FOR CONCERTS AND OTHER PERFORMANCES TO DIVERSIFY THE EXPOSURE OF MUSIC RELATED ARTS TO THE COMMUNITY  (Grants and allocations \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	12,260,667
<b>c</b> YOUTH EDUCATION PROGRAMS - PROGRAMS DEVELOPED IN ACCORDANCE WITH CARNEGIE HALL'S SPIRIT OF DEVELOPMENT IN YOUTH EDUCATION  (Grants and allocations \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	5,928,957
<b>d</b> OTHER OPERATING AND SPECIAL PROJECTS  (Grants and allocations \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	3,769,073
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . <b>▶</b>	52,916,304

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

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		<b>(A)</b>		<b>(B)</b>	
		Beginning of year		End of year	
Assets	<b>45</b> Cash—non-interest-bearing . . . . .		<b>45</b>		
	<b>46</b> Savings and temporary cash investments . . . . .	1,323,038	<b>46</b>	4,017,292	
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b> 571,193			
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>47b</b> 98,027	396,219	<b>47c</b>	473,166
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b> 2,386,334			
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>48b</b>	1,994,167	<b>48c</b>	2,386,334
	<b>49</b> Grants receivable . . . . .			<b>49</b>	
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>50a</b>	
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule) . . . . .			<b>50b</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>			
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>51b</b>		<b>51c</b>	
	<b>52</b> Inventories for sale or use . . . . .			<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges . . . . .	3,706,144	<b>53</b>	2,681,035	
	<b>54a</b> Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	9,971,415	<b>54a</b>	10,621,765	
	<b>b</b> Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54b</b>		
<b>55a</b> Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>				
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		<b>55c</b>		
<b>56</b> Investments—other (attach schedule) . . . . .			<b>56</b>		
<b>57a</b> Land, buildings, and equipment basis . . . . .	<b>57a</b> 136,081,018				
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b> 30,070,365	101,745,924	<b>57c</b>	106,010,653	
<b>58</b> Other assets, including program-related investments (describe <input type="checkbox"/> _____ )	232,422	<b>58</b> <input type="checkbox"/>	47,626		
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .	119,369,329	<b>59</b>	126,237,871		
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .	7,311,479	<b>60</b>	9,837,631	
	<b>61</b> Grants payable . . . . .		<b>61</b>		
	<b>62</b> Deferred revenue . . . . .	8,023,693	<b>62</b>	8,526,189	
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>		
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .		<b>64a</b>		
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		<b>64b</b>		
	<b>65</b> Other liabilities (describe <input type="checkbox"/> _____ )	346,638	<b>65</b> <input type="checkbox"/>	194,220	
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .	15,681,810	<b>66</b>	18,558,040		
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>				
	<b>67</b> Unrestricted . . . . .	103,687,519	<b>67</b>	107,679,831	
	<b>68</b> Temporarily restricted . . . . .		<b>68</b>		
	<b>69</b> Permanently restricted . . . . .		<b>69</b>		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>				
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>		
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>		
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>		
	<b>73 Total net assets or fund balances</b> Add lines 67 through 69 <b>or</b> lines 70 through 72 (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b> equal line 21) . . . . .	103,687,519	<b>73</b>	107,679,831	
	<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .	119,369,329	<b>74</b>	126,237,871	

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

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>a</b>	77,355,637
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12		
<b>1</b>	Net unrealized gains on investments . . . . .	<b>b1</b>	127,768
<b>2</b>	Donated services and use of facilities . . . . .	<b>b2</b>	1,178,850
<b>3</b>	Recoveries of prior year grants . . . . .	<b>b3</b>	
<b>4</b>	Other (specify)  _____	<b>b4</b>	9,163,813
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	10,470,431
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	66,885,206
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b>		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	32,895
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	10,470,431
<b>e</b>	<b>Total revenue</b> (Part I, line 12) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	66,918,101

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

<b>a</b>	Total expenses and losses per audited financial statements . . . . .	<b>a</b>	73,363,324
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17		
<b>1</b>	Donated services and use of facilities . . . . .	<b>b1</b>	1,178,850
<b>2</b>	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>	
<b>3</b>	Losses reported on Part I, line 20 . . . . .	<b>b3</b>	
<b>4</b>	Other (specify)  _____	<b>b4</b>	10,663,607
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	11,842,457
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	61,520,867
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	32,895
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	32,895
<b>e</b>	<b>Total expenses</b> (Part I, line 17) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	61,553,762

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

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

<b>75a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . .	<u>28</u>		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . . . .		<b>75b</b>	No
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" . . . . . If "Yes," attach a statement that includes the information described in the instructions		<b>75c</b>	No
<b>d</b> Does the organization have a written conflict of interest policy? . . . . .		<b>75d</b>	Yes

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0- )	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

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

<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . .	<b>76</b>		No
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . If "Yes," attach a conformed copy of the changes	<b>77</b>		No
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . .	<b>78a</b>		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>78b</b>		
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	<b>79</b>		No
<b>80a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization? . . . . .	<b>80a</b>	Yes	
<b>b</b> If "Yes," enter the name of the organization <b>THE CARNEGIE HALL SOCIETY INC</b> _____ and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
<b>81a</b> Enter direct or indirect political expenditures (See line 81 instructions ) . . . . <b>81a</b> _____			
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>81b</b>		No

**Part VI Other Information** (continued)

		Yes	No
<b>82a</b> Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . . . .	<b>82a</b>	Yes	
<b>b</b> If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III) . . . . .	<b>82b</b>		1,178,850
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	<b>83a</b>	Yes	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . . .	<b>83b</b>	Yes	
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	<b>84a</b>		No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>84b</b>		
<b>85 501(c)(4), (5), or (6) organizations. a</b> Were substantially all dues nondeductible by members? . . . . .	<b>85a</b>		
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	<b>85b</b>		
If "Yes," was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year.			
<b>c</b> Dues assessments, and similar amounts from members . . . . .	<b>85c</b>		
<b>d</b> Section 162(e) lobbying and political expenditures . . . . .	<b>85d</b>		
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . .	<b>85e</b>		
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . .	<b>85f</b>		
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	<b>85g</b>		
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . . . .	<b>85h</b>		
<b>86 501(c)(7) orgs.</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12	<b>86a</b>		0
<b>b</b> Gross receipts, included on line 12, for public use of club facilities . . . . .	<b>86b</b>		0
<b>87 501(c)(12) orgs.</b> Enter <b>a</b> Gross income from members or shareholders . . . . .	<b>87a</b>		0
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>87b</b>		0
<b>88a</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . . . .	<b>88a</b>		No
<b>b</b> At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI . . . . .	<b>88b</b>		No
<b>89a 501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____ 0, section 4912 <input type="checkbox"/> _____ 0, section 4955 <input type="checkbox"/> _____			
<b>b 501(c)(3) and 501(c)(4) orgs.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction . . . . .	<b>89b</b>		No
<b>c</b> Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . <input type="checkbox"/> _____			
<b>d</b> Enter Amount of tax on line 89c, above, reimbursed by the organization . . . . . <input type="checkbox"/> _____ 0			
<b>e All organizations.</b> At any time during the tax year was the organization a party to a prohibited tax shelter transaction? . . . . .	<b>89e</b>		No
<b>f All organizations.</b> Did the organization acquire direct or indirect interest in any applicable insurance contract? . . . . .	<b>89f</b>		No
<b>g For supporting organizations and sponsoring organizations maintaining donor advised funds.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	<b>89g</b>		
<b>90a</b> List the states with which a copy of this return is filed <input type="checkbox"/> NY			
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007 (See instructions) . . . . .	<b>90b</b>		387
<b>91a</b> The books are in care of <input type="checkbox"/> MR RICHARD MATLAGA Telephone no <input type="checkbox"/> (212) 903-9600 881 SEVENTH AVENUE Located at <input type="checkbox"/> NEW YORK, NY ZIP + 4 <input type="checkbox"/> 10019			
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	<b>91b</b>	Yes	No
If "Yes," enter the name of the foreign country <input type="checkbox"/> _____			
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts			

**Part VI Other Information (continued)**

	<b>Yes</b>	<b>No</b>
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the United States? <span style="float: right;"><b>91c</b></span>	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes," enter the name of the foreign country \_\_\_\_\_

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

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

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> BOX OFFICE RECEIPT					15,716,055
<b>b</b> FROM CARNEGIE					
<b>c</b> HALL					12,306,761
<b>d</b> HALL RENTAL					
<b>e</b> OPERATIONS					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments					
<b>96</b> Dividends and interest from securities . . . . .			14	546,809	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property . . . . .					
<b>b</b> non debt-financed property . . . . .			16	53,023	
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	72,909	
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue <b>a</b> SHOP REVENUE			03	359,267	
<b>b</b> TOUR REVENUE			03	124,146	
<b>c</b> ROYALTIES			15	17,515	
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .				1,173,669	28,022,816
<b>105</b> Total (add line 104, columns (B), (D), and (E)) . . . . .					29,196,485

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

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

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93C	CARNEGIE HALL CORPORATION BOX OFFICE RECEIPTS
93E	HALL OPERATIONS

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

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

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

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

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

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



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

				Yes	No
<b>106</b> Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
<b>Totals</b>					

				Yes	No
<b>107</b> Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
<b>Totals</b>					

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

<b>Please Sign Here</b>	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.		
	*****		2009-05-13
	Signature of officer		Date
	RICHARD MATLAGA CHIEF FINANCIAL OFFICER Type or print name and title		

<b>Paid Preparer's Use Only</b>	Preparer's signature	ALAN KLUGER	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4	KPMG LLP 345 Park Avenue New York, NY 101540102			EIN <input type="checkbox"/> Phone no <input type="checkbox"/> (212) 758-9700

**SCHEDULE A  
(Form 990 or 990EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
THE CARNEGIE HALL CORPORATION

**Organization Exempt Under Section 501(c)(3)**  
(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust  
**Supplementary Information—(See separate instructions.)**

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

OMB No 1545-0047

**2007**

**Employer identification number**

13-1923626

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
DENNIS O'CONNELL C/O THE CARNEGIE HALL CORP NEW YORK, NY 10019	STAGEHAND 80 0	422,599	107,445	0
JAMES CSOLLANY C/O THE CARNEGIE HALL CORP NEW YORK, NY 10019	STAGEHAND 80 0	364,343	88,511	0
JOHN GOODSON C/O THE CARNEGIE HALL CORP NEW YORK, NY 10019	STAGEHAND 80 0	327,257	76,459	0
JOHN CARDINALE C/O THE CARNEGIE HALL CORP NEW YORK, NY 10019	STAGEHAND 80 0	347,769	83,125	0
KENNETH BELTRONE C/O THE CARENGIE HALL CORP NEW YORK, NY 10019	STAGEHAND 80 0	350,649	84,061	0
Total number of other employees paid over \$50,000	62			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
IU AND BIBLIOWICZ ARCHITECTS 57 EAST IITH STREET 7TH FLOOR NEW YORK, NY 10003	ARCHITECTURAL	1,454,818
ROSENBERG AND ESTIS P C 733 Third Avenue 14th Floor NEW YORK, NY 10017	LEGAL	952,103
INTERNATIONAL DIGITAL MARKETING 203 MAIN STREET MATAWAN, NJ 07747	MARKETING	711,448
THE COPELAND ASSOCIATES INC 520 8th Avenue 9th floor NEW YORK, NY 10018	ARCHITECTURAL	652,426
TRUE VISION GRAPHICS INC 850 ARTHUR DRIVE ELGIN, IL 60120	GRAPHICS	410,043
Total number of others receiving over \$50,000 for professional services	60	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
TISHMAN CONSTRUCTION CORP 666 Fifth Avenue NEW YORK, NY 10103	CONSTRUCTION	2,115,002
THE NEW YORK TIMES CO 620 8th Avenue NEW YORK, NY 10018	ADVERTISING	1,348,971
STEALTH SECURITY AND ASSOC 7 Bay Drive COPIAGUE, NY 11726	SECURITY	1,032,765
NORTHERN BAY CONTRACTORS INC 3738 13th Street LONG ISLAND CITY, NY 11101	CONSTRUCTION	966,299
RESTAURANT ASSOCIATES 330 Fifth Avenue 5th Floor NEW YORK, NY 10001	CATERING	909,788
Total number of other contractors receiving over \$50,000 for other services	35	

**Part III Statements About Activities** (See page 2 of the instructions.)**Yes No**

<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>171,649</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	<b>1</b>	Yes	
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) 🗨️ <b>a</b> Sale, exchange, or leasing property?	<b>2a</b>		No
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>		No
<b>c</b> Furnishing of goods, services, or facilities?	<b>2c</b>	Yes	
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<b>2d</b>	Yes	
<b>e</b> Transfer of any part of its income or assets?	<b>2e</b>		No
<b>3a</b> Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments )	<b>3a</b>		No
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees?	<b>3b</b>	Yes	
<b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	<b>3c</b>		No
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>3d</b>		No
<b>4a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	<b>4a</b>		No
<b>b</b> Did the organization make any taxable distributions under section 4966?	<b>4b</b>		No
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?	<b>4c</b>		No
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year ▶ _____			
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____			
<b>f</b> Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ <u>0</u>			
<b>g</b> Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ <u>0</u>			

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

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

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state**  \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12  An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization  
 Type I     Type II     Type III - Functionally Integrated     Type III - Other

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

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

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



**Part V Private School Questionnaire** (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
<b>29</b>	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
<b>30</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
<b>31</b>	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
<b>32</b>	Does the organization maintain the following		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b>	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
<b>33</b>	Does the organization discriminate by race in any way with respect to		
<b>a</b>	Students' rights or privileges?		
<b>b</b>	Admissions policies?		
<b>c</b>	Employment of faculty or administrative staff?		
<b>d</b>	Scholarships or other financial assistance?		
<b>e</b>	Educational policies?		
<b>f</b>	Use of facilities?		
<b>g</b>	Athletic programs?		
<b>h</b>	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		
<b>34a</b>	Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
<b>35</b>	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		<b>(a)</b> Affiliated group totals	<b>(b)</b> To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred )			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	171,649
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	171,649
<b>39</b>	Other exempt purpose expenditures	<b>39</b>	61,382,113
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	61,553,762
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table— <b>If the amount on line 40 is—</b> <b>The lobbying nontaxable amount is—</b> Not over \$500,000                                      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000      \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000    \$175,000 plus 10% of the excess over \$1,000,000 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	<b>41</b>	1,000,000
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	250,000
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	0
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	0
<b>Caution:</b> If there is an amount on either line 43 or line 44, you must file Form 4720.			

**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					6,000,000
<b>47</b> Total lobbying expenditures	171,649	186,758	152,826	184,748	695,981
<b>48</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					1,500,000
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- 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 other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount
	No	

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





## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 13-1923626

**Name:** THE CARNEGIE HALL CORPORATION

### Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>a</b> CONCERT EXPENSES	<b>43a</b>	16,237,021	16,237,021		
<b>b</b> EDUCATION PROGRAM	<b>43b</b>	5,300,740	5,300,740		
<b>c</b> REPAIRS, MAINTENANCE AND	<b>43c</b>				
<b>d</b> EQUIPMENT RENTAL	<b>43d</b>	517,170	428,901	88,269	
<b>e</b> INSURANCE	<b>43e</b>	1,503,563		1,503,563	
<b>f</b> PROFESSIONAL FEES	<b>43f</b>	2,862,914	2,657,454	205,460	
<b>g</b> SPECIAL PROJECTS/WORKSHOPS,	<b>43g</b>				
<b>h</b> AND SUBSIDIES	<b>43h</b>	282,541	282,541		
<b>i</b> INVESTMENT EXPENSES	<b>43i</b>	32,895		32,895	
<b>j</b> MISCELLANEOUS	<b>43j</b>	32,324	2,974	29,350	
<b>k</b> BAD DEBTS	<b>43k</b>	6,702	6,702		

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
SANFORD I WEILL 881 Seventh Avenue New York, NY 10019	CHAIRMAN/TRUSTEE 1 0	0	0	0
KLAUS JACOBS 881 Seventh Avenue New York, NY 10019	VICE CHAIRMAN AND TREASURER 1 0	0	0	0
MERCEDES BASS 881 Seventh Avenue New York, NY 10019	VICE CHAIRMAN 1 0	0	0	0
CLARISSA ALCOCK BRONFMAN 881 Seventh Avenue New York, NY 10019	VICE CHAIRMAN 1 0	0	0	0
THE HONORABLE FELIX G ROHATYN 881 Seventh Avenue New York, NY 10019	VICE CHAIRMAN 1 0	0	0	0
KENNETH J BIALKIN 881 Seventh Avenue New York, NY 10019	SECRETARY 1 0	0	0	0
RICHARD A DEBS 881 Seventh Avenue New York, NY 10019	CHAIRMAN EMERITUS 1 0	0	0	0
JAMES D WOLFENSOHN 881 Seventh Avenue New York, NY 10019	CHAIRMAN EMERITUS 1 0	0	0	0
EMANUEL AX 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
NORTON BELKNAP 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
NICOLA BULGARI 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
GEORGE DAVID 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
MARINA KELLEN FRENCH 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
MARILYN HORNE 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
STEPHEN R HOWE JR 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
SALLIE L KRAWCHECK 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
TERRY J LUNDGREN 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
THOMAS G MAHERAS 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
LESTER S MORSE JR 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
WILLIAM G PARRETT 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
JAY R PETSCHKE 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
DR JUDITH RODIN 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
STANLEY S SHUMAN 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
JERRY I SPEYER 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
S DONALD SUSSMAN 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
LINDA J WACHNER 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
ALAN G WEILER 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
DAVID J ZINMAN 881 Seventh Avenue New York, NY 10019	TRUSTEE 1 0	0	0	0
SIR CLIVE GILLINSON 881 Seventh Avenue New York, NY 10019	EXECUTIVE & ARTISTIC DIRECTOR 80 0	800,777	145,804	0
ANNA WEBER 881 Seventh Avenue New York, NY 10019	GEN MGR ARTISTIC AND OPERATION 60 0	316,619	24,923	1,200

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
RICHARD MATLAGA 881 Seventh Avenue New York, NY 10019	CFO 60 0	328,078	24,061	1,200

**TY 2007 Gain/Loss from Sale of Public Securities Schedule****Name:** THE CARNEGIE HALL CORPORATION**EIN:** 13-1923626**Gross Sales Price:** 72,909**Basis:** 0**Sales Expenses:****Total (net):** 72,909

## TY 2007 General Explanation Attachment

**Name:** THE CARNEGIE HALL CORPORATION

**EIN:** 13-1923626

Identifier	Return Reference	Explanation
GENERAL EXPLANATION ATTACHMENT #1	FEDERAL FORM 990, PART IV, LINES 57A-57C	LEASEHOLD IMPROVEMENTS \$129,772,073 EQUIPMENT 6,308,945 ----- TOTAL FIXED ASSETS, AT GROSS \$136,081,018 LESS ACCUMULATED DEPRECIATION AND AMORTIZATION (30,070,365) ----- TOTAL FIXED ASSETS, AT NET \$106,010,653 ===== FORM 990, PART II, LINE 42 CUR RENT YEAR DEPRECIATION EXPENSE \$6,633,303

**TY 2007 Other Assets Schedule**

**Name:** THE CARNEGIE HALL CORPORATION

**EIN:** 13-1923626

Description	Beginning of Year Amount	End of Year Amount
SECURITY DEPOSITS	232,422	47,626



## TY 2007 Other Changes in Net Assets Schedule

**Name:** THE CARNEGIE HALL CORPORATION

**EIN:** 13-1923626

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	127,768
ACTUARIAL LOSS - PENSION PLAN	1,499,795

**TY 2007 Other Expenses Included Schedule**

**Name:** THE CARNEGIE HALL CORPORATION

**EIN:** 13-1923626

Description	Amount
RENTAL EXPENSES OF THE	9,163,813
ACTUARIAL LOSS - PENSION PLAN	1,499,794

**TY 2007 Other Liabilities Schedule****Name:** THE CARNEGIE HALL CORPORATION**EIN:** 13-1923626

<b>Description</b>	<b>Beginning of Year Amount</b>	<b>End of Year Amount</b>
GIFT CERTIFICATES	107,450	139,933
RENT SECURITY DEPOSITS	200,677	15,881
FUNDS HELD FOR OTHERS	38,511	38,406

**TY 2007 Other Revenues Included Schedule**

**Name:** THE CARNEGIE HALL CORPORATION

**EIN:** 13-1923626

Description	Amount
CARNEGIE HALL CORPORATION	9,163,813

**TY 2007 Self Dealing Statement****Name:** THE CARNEGIE HALL CORPORATION**EIN:** 13-1923626

<b>Line Number</b>	<b>Explanation</b>
2c	KENNETH J. BIALKIN IS A PARTNER WITH THE LAW FIRM OF SKADDEN ARPS, SLATE, MEAGHER & FLOM, AND IS A MEMBER OF CARNEGIE HALL'S BOARD OF TRUSTEES. HE AND OTHER MEMBERS OF THE FIRM HAVE PROVIDED VARIOUS LEGAL DISCOUNTED SERVICES TO CARNEGIE HALL.
2d	OFFICERS, DIRECTORS AND KEY EMPLOYEES RECEIVE REIMBURSEMENT OF ORDINARY AND NECESSARY BUSINESS EXPENSES IN ACCORDANCE WITH IRS ACCOUNTABLE PLAN RULES AND COMPANY POLICIES. SEE FORM 990, PART V FOR SALARY AND BENEFIT INFORMATION

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2007 Supplemental Support Schedule

**Name:** THE CARNEGIE HALL CORPORATION

**EIN:** 13-1923626

Year	Gifts, Grants and Contributions Received	Membership Fees Received	Gross Receipts From Admissions, Etc.	Gross Investment Income And Post 1975UBI	Net UBI Pre 1975	Tax Revenues Levied For Organization's Benefit	Value Of Services, Facilities Furnished By Government	Other Income	Total
2006	30,543,467		26,346,996	9,816,454				0	66,706,917
2005	29,245,544		23,151,097	10,796,946				0	63,193,587
2004	22,170,488		22,237,289	9,487,217				0	53,894,994
2003	25,534,272		22,214,841	9,309,500				0	57,058,613