

Form **990-PF**

**Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation**

OMB No 1545-0052

**2003**

Department of the Treasury  
Internal Revenue Service

**Note:** The organization may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2003, or tax year beginning

, 2003, and ending

**G** Check all that apply ☐ Initial return ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

Use the  
IRS label  
Otherwise,  
print  
or type  
See Specific  
Instructions

Name of organization

THE NEW YORK TIMES COMPANY FOUNDATION, INC.

Number and street (or P.O. box number if mail is not delivered to street address)

229 West 43 rd Street, 13th Floor

Room/suite

c/o Tax Dept.

City or town

New York

State

NY

ZIP code

10036-3959

**A** Employer identification number

13-6066955

**B** Telephone number (see instructions)

(212) 556-7019

**H** Check type of organization ☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

**I** Fair market value of all assets at end of year  
(from Part II, column c, line 16)

\$ 2,601,808.

**J** Accounting method ☐ Cash ☒ Accrual

☐ Other (specify)

(Part I, column d must be on cash basis)

**C** If exemption application is pending, check here ☐

**D** 1 Foreign organizations, check here ☐

2 Foreign organizations meeting the 85% test, check here and attach computation ☐

**E** If private foundation status was terminated under section 507(b)(1)(A), check here ☐

**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

**Part I Analysis of Revenue and Expenses**

(The total of amounts in columns b, c, and d may not necessarily equal the amounts in column a) (see instructions)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

**1** Contributions, gifts, grants, etc. received (attach schedule) ☐ if the foundn is not req to att Sch B

7,425,000.

**2** Distributions from split-interest trusts

**3** Interest on savings and temporary cash investments

22,207.

22,207

**4** Dividends and interest from securities

**5a** Gross rents

**b** (Net rental income or (loss))

**6a** Net gain/(loss) from sale of assets not on line 6a

**b** Gross sales prices for all assets on line 6a

**7** Capital gain net income (from Part IV, line 2)

**8** Net short-term capital gain

**9** Income modifications

**10a** Gross sales less returns and allowances

**b** Less Cost of goods sold

**c** Gross profit/(loss) (attach schedule)

**11** Other income (attach schedule)

**12 Total.** Add lines 1 through 11

7,447,207.

22,207.

**13** Compensation of officers, directors, trustees, etc

233,819.

233,819.

**14** Other employee salaries and wages

826,543.

826,543.

**15** Pension plans, employee benefits

87,106.

87,106.

**16a** Legal fees (attach schedule)

**b** Accounting fees (attach schedule) ☐ 501(c)(3) stmt

17,000

17,000.

**c** Other prof fees (attach schedule)

**17** Interest

**18** Taxes (attach schedule)

**19** Depreciation (attach schedule) and depletion

**20** Occupancy

**21** Travel, conferences, and meetings

48,389.

48,389

**22** Printing and publications

20,194.

20,194

**23** Other expenses (attach schedule)

See Line 23 Stmt

40,639.

40,639.

**24 Total operating and administrative expenses.** Add lines 13 through 23

1,273,690

1,273,690

**25** Contributions, gifts, grants paid

6,489,480

6,489,480

**26 Total expenses and disbursements.** Add lines 24 and 25

7,763,170.

7,763,170.

**27** Subtract line 26 from line 12:

**a Excess of revenue over expenses and disbursements**

-315,963

**b Net investment income** (if negative enter 0)

22,207

**c Adjusted net income** (if negative enter 0)

SCANNED NOV 29 2004

ADMINISTRATIVE AND OPERATING EXPENSES

RECEIVED NOV 19 2004 IRS OSC

\$2.208M of "assets" is in the form of "grants receivable" — but Sched B only donor is the NYT Company anyhow...(see p.2 top)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
A s s e t s	1	Cash — non-interest-bearing		196,830	388,727.	388,727.
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable	2,208,600.			
		Less: allowance for doubtful accounts		1,649,100.	2,208,600.	2,208,600.
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments — U.S. and state government obligations (attach schedule)				
	b	Investments — corporate stock (attach schedule)				
	c	Investments — corporate bonds (attach schedule)				
	11	Investments — land, buildings, and equipment basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments — mortgage loans					
13	Investments — other (attach schedule)					
14	Land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
15	Other assets (describe ▶ See Other Assets Stmt.)		8,214.	4,481.	4,481.	
16	<b>Total assets</b> (to be completed by all filers — see instructions. Also, see page 1, item I)		1,854,144.	2,601,808	2,601,808	
L i a b i l i t i e s	17	Accounts payable and accrued expenses				
	18	Grants payable		1,649,100.	2,208,600.	
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶ See Other Liab Stmt.)		96,882.	41,509.	
	23	<b>Total liabilities</b> (add lines 17 through 22)		1,745,982.	2,250,109.	
N e t A s s e t s  F u n d B a l a n c e s	Organizations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>					
	24	Unrestricted		-1,540,938.	-1,856,901.	
	25	Temporarily restricted		1,649,100.	2,208,600.	
	26	Permanently restricted				
	Organizations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	<b>Total net assets or fund balances</b> (see instructions)		108,162.	351,699	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)		1,854,144.	2,601,808.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	108,162.
2	Enter amount from Part I, line 27a	2	-315,963
3	Other increases not included in line 2 (itemize) ▶ Contributions for Grants Program	3	2,993,700
4	Add lines 1, 2, and 3	4	2,785,899
5	Decreases not included in line 2 (itemize) ▶ Net assets released from temporary restrictions	5	2,434,200
6	<b>Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30</b>	6	351,699

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	N/A			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7

2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8

3

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the organization liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the organization does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2002	6,906,184	4,110,140.	1.680280
2001	6,656,019	3,096,300	2.149669
2000	5,405,110.	3,892,957	1.388433
1999	5,323,646	2,622,587.	2.029922
1998	5,243,774	2,714,477	1.931781

2 Total of line 1, column (d)

2

9.180085

3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

3

1.836017

4 Enter the net value of noncharitable-use assets for 2003 from Part X, line 5

4

4,033,194

5 Multiply line 4 by line 3

5

7,405,013.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

222.

7 Add lines 5 and 6

7

7,405,235.

8 Enter qualifying distributions from Part XII, line 4

8

7,763,170

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 — see instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling letter _____ (attach copy of ruling letter if necessary — see instructions)		1	222.
b Domestic organizations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic organizations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	222.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-		5	222.
6 Credits/Payments			
a 2003 estimated tax pmts and 2002 overpayment credited to 2003	6a	3,562.	
b Exempt foreign organizations — tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,562.	
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3,340.	
11 Enter the amount on line 10 to be: Credited to 2004 estimated tax <u>3,340</u> Refunded <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the organization attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? <i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the organization in connection with the activities</i>		X
c Did the organization file <b>Form 1120-POL</b> for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the organization <u>\$</u> (2) On organization managers <u>\$</u>		
e Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on organization managers <u>\$</u>		
2 Has the organization engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
3 Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the organization have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>NEW YORK</u>		
b If the answer is 'Yes' to line 7, has the organization furnished a copy of Form 990 PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If 'No,' attach explanation</i>	X	
9 Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2003 or the taxable year beginning in 2003 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X
11 Did the organization comply with the public inspection requirements for its annual returns and exemption application? Web site address <u>nytimes.com/foundation</u>	X	
12 The books are in care of <u>Mr. V. DiMaggio</u> Telephone no <u>(212) 556-5938</u> Located at <u>229 West 43rd Street, 13th Fl., NY, NY</u> ZIP + 4 <u>10036-3959</u>		
13 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 PF in lieu of <b>Form 1041</b> — Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>13</u>		

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
<b>1 a</b> During the year did the organization (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the organization agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		
Organizations relying on a current notice regarding disaster assistance check here	<input type="checkbox"/>	
<b>c</b> Did the organization engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2003?		
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
<b>a</b> At the end of tax year 2003, did the organization have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2003?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If 'Yes,' list the years	20__ , 20__ , 20__ , 19__	
<b>b</b> Are there any years listed in 2a for which the organization is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)		
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20__ , 20__ , 20__ , 19__	
<b>3 a</b> Did the organization hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b> If 'Yes,' did it have excess business holdings in 2003 as a result of (1) any purchase by the organization or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the organization had excess business holdings in 2003)		
<b>4 a</b> Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes?		
<b>b</b> Did the organization make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2003?		
<b>5 a</b> During the year did the organization pay or incur any amount to		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		
Organizations relying on a current notice regarding disaster assistance check here	<input type="checkbox"/>	
<b>c</b> If the answer is 'Yes' to question 5a(4), does the organization claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)		
<b>6 a</b> Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		

If you answered 'Yes' to 6b also file Form 8870

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see 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 and deferred compensation	(e) Expense account, other allowances
Jack Rosenthal 229 West 43rd St., 10 th fl Rm. 1033, NY, NY 10036-3959	President & Director 40	233,819	0.	0.
Arthur Sulzberger, Jr. 229 West 43rd St., 11th fl See Part VIII, Line 1 Stmt	Director 1	0.	0.	2,000.
		0.	0.	8,000.

**2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If 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 and deferred compensation	(e) Expense account, other allowances
Randy Becker 229 W. 43 St., NY, NY 10036	Program Officer 40 hrs	63,972	0	0
Barbara Casalino 229 W. 43 St., NY, NY 10036	Office Manager 40 hrs	72,775	0.	0
Clare Salvaggio 229 W. 43 St., NY, NY 10036	Grants Admin 40 hrs	78,000.	0.	0.
Rita M. Wnuk 229 W 43 St., NY, NY 10036	Comm Coordinator 40 hrs	54,840.	0.	0

Total number of other employees paid over \$50,000

None

**3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0

Total number of others receiving over \$50,000 for professional services

None

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	
	0.
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
	0.
2	
All other program-related investments See instructions	
3	
<b>Total.</b> Add lines 1 through 3	None

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	
b Average of monthly cash balances	1b	4,094,613
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b and c)	1d	4,094,613
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	4,094,613.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	61,419
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,033,194.
6 Minimum investment return. Enter 5% of line 5	6	201,660.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6		1	201,660
2a Tax on investment income for 2003 from Part VI, line 5	2a	222.	
b Income tax for 2003 (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2c	222.
3 Distributable amount before adjustments Subtract line 2c from line 1		3	201,438.
4a Recoveries of amounts treated as qualifying distributions	4a	0	
b Income distributions from section 4947(a)(2) trusts	4b	0	
c Add lines 4a and 4b		4c	0
5 Add lines 3 and 4c		5	201,438
6 Deduction from distributable amount (see instructions)		6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	201,438.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	7,763,170
b Program-related investments — Total from Part IX-B	1b	0
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	7,763,170
5 Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	222
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	7,762,948

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2002	(c) 2002	(d) 2003
1 Distributable amount for 2003 from Part XI, line 7				201,438.
2 Undistributed income, if any, as of the end of 2002				
a Enter amount for 2002 only			204,449.	
b Total for prior years 20____, 20____, 19____				
3 Excess distributions carryover, if any, to 2003				
a From 1998	0			
b From 1999	0			
c From 2000	5,405,110			
d From 2001	6,466,352.			
e From 2002	6,906,184.			
f Total of lines 3a through e	18,777,646.			
4 Qualifying distributions for 2003 from Part XII, line 4 ▶ \$ 7,763,170				
a Applied to 2002, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2003 distributable amount				
e Remaining amount distributed out of corpus	7,763,170.			
5 Excess distributions carryover applied to 2003 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	26,540,816			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0		
e Undistributed income for 2002 Subtract line 4a from line 2a Taxable amount — see instructions			204,449.	
f Undistributed income for 2003 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2004				201,438.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 1998 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2004. Subtract lines 7 and 8 from line 6a	26,540,816			
10 Analysis of line 9				
a Excess from 1999	0.			
b Excess from 2000	5,405,110.			
c Excess from 2001	6,466,352.			
d Excess from 2002	6,906,184.			
e Excess from 2003	7,763,170.			

BAA

Form 990-PF (2003)





**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or- contribution	Amount
<b>a</b> <i>Paid during the year</i>				
Matching Gifts, Colleges, Universities	n/a		Higher Education	558,098.
Matching Gifts/Secondary Schools	n/a		Education	371,841.
Matching Gifts/Cultural	n/a		Cultural Affairs	286,298
Matching Gifts/Environment	n/a		Environmental	80,322.
Grant Programs			Journalism, Service Culture, Environment, Education	5,167,020.
Matching Gifts/Journalism			Journalism	25,901
<b>Total</b>			<b>3 a</b>	<b>6,489,480</b>
<b>b</b> <i>Approved for future payment</i>				
- See Attached Listing -			-See Attached-	
<b>Total</b>			<b>3 b</b>	

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see instructions)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue					
a	N/A					
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	22,207.	
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
a						
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)				22,207.	
13	<b>Total.</b> Add line 12, columns (b), (d), and (e)				22,207	22,207

(See worksheet in the instructions for line 13 to verify calculations )

## **Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]



**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No 1545-0047

**2003**

Name of organization

Employer identification number

THE NEW YORK TIMES COMPANY FOUNDATION, INC

13-6066955

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)( ) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation  
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation  
☐ 501(c)(3) taxable private foundation

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

**General Rule —**

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

**Special Rules —**

- ☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II )
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III )
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ) ▶ \$

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

**BAA For Paperwork Reduction Act Notice, see the instructions for Form 990 and Form 990-EZ.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2003)

Name of organization

Employer identification number

THE NEW YORK TIMES COMPANY FOUNDATION, INC.

13-6066955

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	The New York Times Company 229 West 43rd Street New York, NY 10036	\$ 7,425,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

**Miscellaneous Statement**

Part XV, Ln 2 d, cont'd, Supplementary Information

No grants are made to individuals (other than the New York Times College Scholars), sectarian religious institutions and causes, for capital improvements, for health, drug or alcohol therapy purposes. Applicants from localities served by business units of The New York Times Company should apply through those business units. Grants are usually not made at the neighborhood level or to organizations outside the United States.

Total



Form 990-PF, Page 1, Part I, Line 23

**Line 23 Stmt**

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Equipment, non-cap	23,453			23,453.
Subscriptions	4,024			4,024.
Postage, Frgt, Messenger	5,763.			5,763.
Association dues	11,970			11,970
Investor relations	7,644			7,644.
Miscellaneous	55,838.			55,838.
Temporary help	20,000.			20,000
Content / Features	2,618.			2,618.
Telephone & Comm	1,150.			1,150
Training & Development	5,060			5,060.
Reverse p/y accrual	-96,881			-96,881.
Total	40,639			40,639

Form 990-PF, Page 1, Part I, Line 16b

**L-16b Stmt**

<b>Line 16b - Accounting Fees:</b> Name of Provider	Type of Service Provided	Amount Paid
Deloitte & Touche LLP	Annual Report audit fee	17,000
2 World Financial Center		
New York, NY 10281		
Total		17,000

Form 990-PF, Page 2, Part II, Line 15

**Other Assets Stmt**

Line 15 - Other Assets:	End of Year	
	Book Value	Fair Market Value
Prepaid contributions	4,481.	4,481.
Total	4,481	4,481

Form 990-PF, Page 2, Part II, Line 22

**Other Liab Stmt**

Line 22 - Other Liabilities:	Ending Book Value
Difference between 2003 accrued liabilities and 2004 actual	41,509.
Total	41,509

Form 990-PF, Page 6, Part VIII, Compensation

**Part VIII, Line 1 Stmt**

(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 and deferred compensation	(e) Expense account, other allowances
New York, NY 10036-3959				
Russell T. Lewis 229 West 43rd St., 14th fl New York, NY 10036-3959	Executive VP 0	0.	0	0.
Leonard P. Forman 229 West 43rd St., 14th fl New York, NY 10036-3959	Senior VP 0	0	0.	0
Michael Golden 229 West 43rd St., 14th fl New York, NY 10036-3959	Senior VP & Director .5	0	0.	2,000
Solomon B. Watson IV 229 West 43rd St., 14th fl New York, NY 10036-3959	Senior VP 0	0.	0	0.
Rhonda L. Brauer 229 West 43rd St., 12th fl New York, NY 10036-3959	Secretary 0	0.	0	0.
Jacqueline H. Dryfoos 229 West 43rd St., New York, NY 10036-3959	Director 2	0	0.	2,000
R. Anthony Benten 229 West 43rd St., 13th fl New York, NY 10036-3959	Treasurer 0	0.	0	0.
Randall K. Short 229 West 43rd St., 13th fl New York, NY 10036-3959	Asst Treasurer 0	0.	0	0.
Ellen R. Marram c/o The NYT Company 229 West 43rd St., NY, NY 10036	Director 1	0.	0	2,000
Donald M. Stewart c/o The NYT Company 229 West 43rd St., NY, NY 10036	Director 1	0.	0	2,000

Total

0

0

8,000

**Supporting Statement of:**

Form 990-PF, p1/Line 1(a)

Description	Amount
Unrestricted Contributions	4,990,800.
Net assets released from restrictions	2,434,200.
Total	<u>7,425,000.</u>

**Supporting Statement of:**

Form 990-PF, p2/Line 1(a)

Description	Amount
Net increase in cash and cash equivalents	6,612.
Cash and cash equivalents at the beginning of the year	190,218.
Total	<u>196,830.</u>

**Application for Extension of Time to File an  
Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.****Part I Automatic 3-Month Extension of Time** — Only submit original (no copies needed)**Note: Form 990-T corporations** requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041*

<b>Type or print</b> File by the due date for filing your return. See instructions.	Name of Exempt Organization		Employer identification number	
	THE NEW YORK TIMES COMPANY FOUNDATION, INC.		13-6066955	
	Number, street, and room or suite number. If a P.O. box, see instructions.			
	229 West 43 rd Street, 13th Floor, c/o-Tax Dept.		state ZIP code	
	City, town or post office. For a foreign address, see instructions.		NY	10036-3959

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

- |   |  |                                    |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990               | <input type="checkbox"/> Form 990-T (corporation)                    | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL            | <input type="checkbox"/> Form 990-T (Section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ            | <input type="checkbox"/> Form 990-T (trust other than above)         | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A                                 | <input type="checkbox"/> Form 8870 |

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

- 1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until Aug 16, 20 04, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☒ calendar year 20 03 or
- ▶ ☐ tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ 2,000.

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ 4,462

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ 0

**Signature and Verification**

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, and that I am authorized to prepare this form.

Signature ▶



Title ▶ Assistant Treasurer

Date ▶ 05/12/04

**BAA For Paperwork Reduction Act Notice, see instructions.**Form **8868** (12-2000)

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

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

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

**Part II Additional (not automatic) 3-Month Extension of Time – Must File Original and One Copy.**

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	THE NEW YORK TIMES COMPANY FOUNDATION, INC.	13-6066955
	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS Use Only
	229 West 43 rd Street, 13th Floor, c/o-Tax Dept.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	New York NY 10036-3959	

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

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (Section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

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

- If the organization does **not** have an office or place of business in the United States, check this box ☐
- If this is for a **Group Return**, enter the organizations four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ☐ If it is **part** of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until Nov 15, 2004
- 5 For calendar year 2003, or other tax year beginning       , 20   and ending       , 20
- 6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension Detailed financial information needed to prepare an accurate return is not yet available.

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ 0
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ 4,462.
- c **Balance due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ 0.

**Signature and Verification**

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

Signature [Signature] Title Assistant Treasurer Date 08/12/04

**Notice to Applicant – To be Completed by the IRS**

- ☐ We **have** approved this application. Please attach this form to the organization's return.
- ☐ We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely filed return. Please attach this form to the organization's return.
- ☐ We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- ☐ We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested.
- ☐ Other \_\_\_\_\_

Director \_\_\_\_\_ By \_\_\_\_\_

**Alternate Mailing Address** – Enter the address if you want the copy of this application f address different than the one entered above

Type or print	Name
	Number and street (include suite, room, or apartment number) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)

BAA

F/FZ0502 01/05/04

EXTENSION APPROVED

AUG 23 2004

FIELD DIRECTOR  
SUBMISSION PROCESSING OGDEN