



Form 8879-EO	Form	8	8	7	9-	E	0	
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Department of the Treasury Internal Revenue Service

Name of exempt organization

IRS *e-file* Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2012, or fiscal year beginning 0.7/01, 2012, and ending 0.6/30, 20, 13

Do not send to the IRS. Keep for your records.	
------------------------------------------------	--

Employer identification number

THE COOPER UNION FOR THE ADVANCEMENT OF	13-5562985
lame and title of officer	
, LAWRENCE CAUCIATORE, CHIEF OF STAFF, SECY TO THE BUARD DF	TRUSTEES
Part I Type of Return and Return Information (Whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicable the the second the se	

m the return. If you form was blank, then r 5a, below, and the amount on that line leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here 🕨 🗋	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>54761334.</u>
2a	Form 990-EZ check here	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here 🕨	b Tax based on investment income (Form 990-PF, Part VI, line 5).	4b	
5a	Form 8868 check here 🕨	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Declaration and Signature Authorization of Officer Part II

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only		
X lauthorize KPMG LLP	to enter my PIN	[1]1 4 3 4 as my signature
ERO firm name	ŗ	Enter five numbers, but do not enter all zeros
on the organization's tax year 2012 electronically filed return. If I hav being filed with a state agency(ies) regulating charities as part of the ERO to enter my PIN on the return's disclosure consent screen.	e indicated within th IRS Fed/State proc	is return that a copy of the return is gram, I also authorize the aforementioned
As an officer of the organization, I will enter my PIN as my signature If I have indicated within this return that a copy of the return is being the IRS Fed/State program, will enter my PIN on the return's disclose	filed with a state ag	
Officer's signature	Date	5-8-14
Part III Certification and Authentication	Date	
	·····	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	1	3407311646
number (EFIN) followed by your five-digit self-selected PIN.	Ĺ	do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the indicated above. I confirm that I am submitting this return in accordance with Information for Authorized IRS <i>e-file</i> Providers for Business Returns.	2012 electronically the requirements of	filed return for the organization Pub. 4163, Modernized e-File (MeF)
ERO's signature 🕨	Date 🕨	
ERO Must Retain This Form - S Do Not Submit This Form To the IRS Un		o Do So
For Paperwork Reduction Act Notice, see back of form.	iess Requested 1	Form 8879-EO (2012)
JSA 2E1676 1.000		

	_				_	OMB No. 1545-0047
Forn	, g	90	Return of Organization Exempt	From I	ncome lax	2012
			Under section 501(c), 527, or 4947(a)(1) of the Internal		Code (except black lung	
		of the Treasury	benefit trust or private found			Open to Public
		nue Service	► The organization may have to use a copy of this return endar year, or tax year beginning 07/01, 2012,			Inspection
	orth		me of organization THE COOPER UNION FOR THE ADVANCEN		D Employer identific	1 10
B Cr	ieck if ap	nlianhlai	CIENCE & ART		,,	
	Addre	ss Do	ng Business As		13-5562985	1
	chang Name	e		Room/suite	E Telephone number	
	Initial	return 3	COOPER SQUARE, 7TH FLOOR		(212) 353-4	381
	Termi	nated Cit	y or town, state or country, and ZIP + 4			
	Amen return	IN.	EW YORK, NY 10003-7120		G Gross receipts \$	98,161,952.
	Applic pendi	9	Name and address of principal officer: JAMSHED BHARUCHA, PRI	ESIDENT	H(a) Is this a group retur affiliates?	n for Yes X No
		7	EAST 7TH STREET NEW YORK, NY 10003		H(b) Are all affiliates incl	uded? Yes No
		empt status:	X 501(c)(3) 501(c) () 4947(a)(1) or	r 52	7 If "No," attach a list.	(see instructions)
			.COOPER.EDU	1.	H(c) Group exemption nu	· · · · · · · · · · · · · · · · · · ·
		of organization		L Year of	formation: 1859 M State	of legal domicile: NY
Pa		Summa	v			
	1	Briefly deso	ribe the organization's mission or most significant activities:			
e			PER UNION FOR THE ADVANCEMENT OF SCIENCE AN			
nan			COLLEGE THAT OFFERS BACHELOR'S AND MASTER			
Governance			RING AND ARCHITECTURE AND BACHELOR'S DEGREE			
			box \blacktriangleright if the organization discontinued its operations or disposed		1 1	22.
Activities &			voting members of the governing body (Part VI, line 1a)			22.
itie	4	Number of	independent voting members of the governing body (Part VI, line 1b)			982.
cti			er of individuals employed in calendar year 2012 (Part V, line 2a)			21.
۲			er of volunteers (estimate if necessary)		6	-226.
	/a b	Not uprolot	unrelated business revenue from Part VIII, column (C), line 12 ed business taxable income from Form 990-T, line 34			-226.
	D	Net unrelat			Prior Year	Current Year
	8	Contributio	ns and grants (Part VIII, line 1h)		7,450,475.	8,988,209.
Revenue	9	Program se	rvice revenue (Part VIII, line 2g)	FOR	3,141,881.	3,421,111.
e vel	10	Investment	rvice revenue (Part VIII, line 2g) income (Part VIII, column (A), lines 3, 4, and 7d)	PECTION	37,724,396.	38,132,138.
۳,			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,334,333.	4,219,876.
			ue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		51,651,085.	54,761,334.
			similar amounts paid (Part IX, column (A), lines 1-3)		688,677.	784,809.
			id to or for members (Part IX, column (A), line 4)		0	,0
s	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5-10)		35,037,997.	32,829,463.
Expenses			al fundraising fees (Part IX, column (A), line 11e)		0	0
, xpe			aising expenses (Part IX, column (D), line 25) \blacktriangleright 4, 489, 700			
ш	17	Other expe	nses (Part IX, column (A), lines 11a-11d, 11f-24f)		32,343,184.	32,851,345.
	18	Total expen	ses. Add lines 13-17 (must equal Part IX, column (A), line 25)		68,069,858.	66,465,617.
			ss expenses. Subtract line 18 from line 12		-16,418,773.	-11,704,283.
s or					Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets	(Part X, line 16)		894,482,969.	904,480,210.
it As Id B	21	Total liabilit	ies (Part X, line 26)		318,247,617.	314,258,427.
Pun Re N	22	Net assets	or fund balances. Subtract line 21 from line 20		576,235,352.	590,221,783.
Pa			ire Block			
Und	ler pen ect. ar	alties of perju	ry, I declare that I have examined this return, including accompanying schedules a Declaration of preparer (other than officer) is based on all information of which pre	nd statements	s, and to the best of my knowled knowledge.	dge and belief, it is true,
				. ,		
	ign					
H	ere	Signa	ture of officer		Date	
		│				
			or print name and title	Data	Chook if	DTIN
Paid			E Hunt, Senior Tax Manager	Date 5/1/1/1	Check if self-	PTIN
	arer			5/14/1		P00916443
	Only	Firm's name		1.0.0		5565207
		Firm's addre				-758-9700
			this return with the preparer shown above? (see instructions)			X Yes No
For JSA	Papei	work Redu	ction Act Notice, see the separate instructions.			Form 990 (2012)
2E10	65 1.00			0.07	4470	53.6-
		18380 2'	231 5/7/2014 9:23:34 AM V 12-7.12	221	_4478	PAGE

(Rev. January 2013)

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

Х If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ► All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions

		Enter mer sidentifying number, see matuctions
Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print	THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE & ART	13-5562985
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
filing your	30 COOPER SQUARE, 7TH FLOOR	
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	NEW YORK, NY 10003	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application	Return
Is For	Code	Is For	Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720- (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

● The books are in the care of ▶ MILTON YUEN

	Telephone No. ▶ 212-453-4140 FAX No. ▶		
•	f the organization does not have an office or place of business in the United States, check this box		•
•	f this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		. If this is
	the whole group, check this box		and attach
	st with the names and EINs of all members the extension is for.		
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time		
	until 02/15 , 20 14 , to file the exempt organization return for the organization named at	oove	e. The extension is
	for the organization's return for:		
	▶ calendar year 20 or		
	• x tax year beginning $07/01$, 20_{12} , and ending $06/30$,	20	13
2	If the tax year entered in line 1 is for less than 12 months, check reason:	۱	
	Change in accounting period		
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	nonrefundable credits. See instructions.	3a	\$
k	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.	3b	\$
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS		
	(Electronic Federal Tax Payment System). See instructions.	3c	\$
Са	ition. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for	r pay	ment instructions.
For	Privacy Act and Paperwork Reduction Act Notice, see Instructions.	Forr	n 8868 (Rev. 1-2013)

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).

Pai	rt II	Additional (Not Automatic) 3-Month E	xtension o	of Time. Only file the orig	inal (no copies needed).	
				E	nter filer's identifying number, see	instructions
		Name of exempt organization or other filer, see instructions.			Employer identification number (EIN) or	
Тур	e or					
prin	nt	THE COOPER UNION FOR THE ADVANCEMENT	OF SCIENC	CE & ART	13-5562985	
File b	the	Number, street, and room or suite no. If a P.O. bo	x, see instruc	ctions.	Social security number (SSN)	
	ate for	30 COOPER SQUARE, 7TH FLOOR				
filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
	ictions.	NEW YORK, NY 10003				
Ente	er the Re	eturn code for the return that this application	is for (file a	a separate application for ea	ach return)	. 0 1
Арр	lication		Return	Application		Return
ls Fo	or		Code	Is For		Code
Form	n 990 or	Form 990-EZ	01			
Form	n 990-Bl	-	02	Form 1041-A		08
Form	n 4720	(individual)	03	Form 4720		09
Form	n 990-PF		04	Form 5227		10
Forn	n 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069		11
		(trust other than above)	06	Form 8870		12
STO	P! Do n	ot complete Part II if you were not already	granted an	automatic 3-month exter	ision on a previously filed For	n 8868.
		s are in the care of MILTON YUEN				
Te	elephone	e No. ► 212-453-4140	F	FAX No. 🕨		
• If	the orga	anization does not have an office or place of	business in	the United States, check the	nis box	
		or a Group Return, enter the organization's fo				
for t	he whole	e group, check this box ► 📃 . I	f it is for pa	rt of the group, check this	box And att	ach a
		names and EINs of all members the extension				
4		st an additional 3-month extension of time u			,20 14 .	
5		endar year, or other tax year beginni			d ending 06/30	20 13 .
6		ax year entered in line 5 is for less than 12 m			turn Final return	
		hange in accounting period				
7	the second se	detail why you need the extension INFOR	MATION 1	NECESSARY TO PREPA	ARE A COMPLETE AND	
-		RATE RETURN IS NOT YET AVAILA			statistic construction of a state of a	
					······································	
		···· · · · · · · · · · · · · · · · · ·		· · · · · · · · · ·		
8a	If this	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tent	ative tax, less any	
		indable credits. See instructions.			8a \$	
b	If this	application is for Form 990-PF, 990-T,	4720, or	6069, enter any refun	dable credits and	
		ed tax payments made. Include any pri				
		paid previously with Form 8868.	-		8b \$	
с		e Due. Subtract line 8b from line 8a. Include	your paym	ent with this form, if requir		
-		onic Federal Tax Payment System). See instru			8c \$	
		Signature and Verifica		st be completed for P		

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 🕨

barsara & Hent

 Title
 Senior Tax Manager
 Date
 2/10/14

 KPMG LLP
 Form 8868 (Reference)

Form 8868 (Rev. 1-2013)

THE	COOPER	UNION	FOR	THE	ADVANCEMENT	OF

Page 2

	X
Briefly describe the organization's mission:	
SEE SCHEDULE O	
Did the organization undertake any significant program services during the year which were not list	ted on the
prior Form 990 or 990-EZ?	
If "Yes," describe these new services on Schedule O.	
Did the organization cease conducting, or make significant changes in how it conducts, any	/ program
services?	
If "Yes," describe these changes on Schedule O.	
Describe the organization's program service accomplishments for each of its three largest program expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of gratthe total expenses, and revenue, if any, for each program service reported.	
(Code:) (Expenses \$ 23,707,033. including grants of \$ 562.) (Revenue \$	\$ <u>2,799,037.</u>)
INSTRUCTION: THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND	, , , , , , , , , , , , , , , ,
ART IS AMONG THE UNITED STATES' OLDEST AND MOST DISTINGUISHED	
HIGHER EDUCATION INSTITUTIONS. IT IS COMPRISED OF THREE	
PROFESSIONAL SCHOOLS, SPECIALIZING IN THE FIELDS OF ARCHITECTURE,	
ART AND ENGINEERING. RECOGNIZED FOR ITS RIGOROUS AND DYNAMIC	
CURRICULUM WITH AN INTERNATIONALLY RENOWNED, AWARD-WINNING FACULTY	
EXPENSES FOR FACULTY AND RELATED INSTRUCTION FOR THE ACADEMIC	
PROGRAMS OF ARCHITECTURE, ART, ENGINEERING, AND HUMANITIES AND	
SOCIAL SCIENCES INCLUDE ALLOCATED FACILITIES, INTEREST, AND	
DEPRECIATION EXPENSES.	
(CONTINUED ON SCHEDULE O)	
ACADEMIC SUPPORT: STAFF AND OPERATING EXPENSES FOR THE ACADEMIC PROGRAMS OF ARCHITECTURE, ART, ENGINEERING, AND HUMANITIES AND SOCIAL SCIENCES INCLUDING THE CENTER FOR WRITING, LIBRARY, INFORMATION TECHNOLOGY, INSURANCE, INSTITUTIONAL SAFETY, GRANT	
SUPPORT, AND ALLOCATED FACILITIES, INTEREST, AND DEPRECIATION	
EXPENSES.	
(Code:) (Expenses \$ 3,192,808. including grants of \$ 0) (Revenue \$	\$)
PUBLIC SERVICE: SATURDAY PROGRAM OFFERS SIX FREE STUDIO ART	·/
COURSES ENROLLING OVER 200 NEW YORK CITY PUBLIC HIGH SCHOOL	
STUDENTS. MOST CLASSES MEET FROM 10 AM TO 5 PM ON SATURDAYS FOR	
STUDENTS. MOST CLASSES MEET FROM 10 AM TO 5 PM ON SATURDAYS FOR TWO SEMESTERS, OCTOBER THROUGH APRIL. THIS SCHEDULE PROVIDES THE	
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STUDENTS. MOST CLASSES MEET FROM 10 AM TO 5 PM ON SATURDAYS FOR TWO SEMESTERS, OCTOBER THROUGH APRIL. THIS SCHEDULE PROVIDES THE INTENSIVE WORKING TIME NECESSARY TO EXPLORE MEDIA, TECHNIQUE, AND CONCEPT FOR BOTH THE BEGINNER AND THE STUDENT WITH ART EXPERIENCE. THE OUTREACH PRE-COLLEGE PROGRAM WAS FORMED IN 1992 TO EXTEND THE SUMMER ART PROGRAM TAUGHT AND ADMINISTERED BY THE SCHOOL OF ART FACULTY. (CONTINUED ON SCHEDULE O) Other program services (Describe in Schedule O.)) Form 990

Form 9	90 (2012)		I	⊃age 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Χ	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			57
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	404	v	
4.0	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X X	
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13	X	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Λ	
a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	14b	Х	
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	140	~~~~	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		Х
46	organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		Х
47	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV			
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		Х
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	<u> </u>		22
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			- 23
19	If "Yes," complete Schedule G, Part III	19		Х
20 -	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			37
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		37	
~~	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	22	Х	
24 0	employees? <i>If "Yes," complete Schedule J</i>	23	- 23	
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b		24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
U	to defease any tax-exempt bonds?	24c		
b	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		37	
	conservation contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	24		v
~~	Part I	31		X
32		32		X
33	complete Schedule N, Part II	52		21
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
04	or IV, and Part V, line 1.	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b				
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

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Par				
	Check if Schedule O contains a response to any question in this Part V	<u></u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Tes	NO
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 982			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
		4a	X	
b	If "Yes," enter the name of the foreign country: ► <u>ATTACHMENT 1</u>			
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b	_	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	_	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
-	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
122	against amounts due or received from them.)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b JSA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	
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Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in			"No"
	Check if Schedule O contains a response to any question in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year			
1a	Enter the number of voting members of the governing body at the end of the tax year.			
	If there are material differences in voting rights among members of the governing body, or if the governing			
L	body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b 21			
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2	Х	
•	any other officer, director, trustee, or key employee?	-		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		X
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3 4	Х	21
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 5	21	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	0		24
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7.		X
	one or more members of the governing body?	7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			v
_	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	-	37	
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		37
Centi	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	1	Х
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coue	.) Yes	No
		40.	162	X
10a	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	404		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Δ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40.	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Λ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		v	
	rise to conflicts?	12b	Х	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		37	
	describe in Schedule O how this was done	12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		5.7	
а	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
0	organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	01(c)(3)s o	nly)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	t inter	est p	oolicy,
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who possesses the books and records of the person who per	ne		
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos heck ss pe	erson	e than c is both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) MARK_EPSTEIN	1.00	X						a	0	0
(2) DOUGLAS A P HAMILTON MEMBER-BD OF TRUST. UNTIL 7/12	1.00	X						0	0	0
(3) PETER CAFIERO MEMBER - BOARD OF TRUSTEES	1.00	Х						0	0	0
(4) VIKAS KAPOOR MEMBER-BD OF TRUST. UNTIL 1/13	1.00	Х						0	0	0
(5) JOSEPH DOBRONYI MEMBER - BOARD OF TRUSTEES	1.00	Х						0	0	0
(6) RAY FALCI MEMBER - BOARD OF TRUSTEES	1.00	Х						C	0	0
(7) LAWRENCE B BENENSON MEMBER - BOARD OF TRUSTEES	1.00	Х						C	0	0
(8) ROBERT A BERNHARD MEMBER - BOARD OF TRUSTEES	1.00 1.00	X						0	0	0
(9) DONALD BLAUWEISS MEMBER - BOARD OF TRUSTEES	1.00	Х						0	0	0
(10) MICHAEL BORKOWSKY MEMBER - BOARD OF TRUSTEES	1.00 1.00	Х						0	0	0
(11) CHARLES S COHEN MEMBER - BOARD OF TRUSTEES	1.00	Х						0	0	0
(12) FRANCOIS DE MENIL VICE CHAIRMAN	1.00	X						0	0	0
(13) STANLEY N LAPIDUS MEMBER-BD OF TRUST UNTIL 12/12	1.00 1.00	X						0	0	0
(14) RICHARD S LINCER MEMBER - BOARD OF TRUSTEES	1.00	Х						0	0	0

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	(A) Name and title	(B) Average hours per week (list any hours for related	box, office	unles r and	Pos neck ss pe d a d	erson lirect	e than o is both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportab compensatior related organizatio (W-2/1099-N	n from	(F) Estimated amount of other compensation from the
		organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(**-2/1099-1	100)	organization and related organizations
5)	JOHN C MICHAELSON MEMBER - BOARD OF TRUSTEES	1.00	v									
6)	DANIEL OKRENT MEMBER - BOARD OF TRUSTEES	1.00	X							/	0	
7)	BRUCE PASTERNACK	1.00										
8)	MEMBER - BOARD OF TRUSTEES GEORGIANA SLADE	1.00	X									
9)	MEMBER-BD OF TRUST UNTIL 12/12 MARTIN TRUST	1.00	X							/	0	
))	MEMBER - BOARD OF TRUSTEES CYNTHIA WEILER	1.00	Х						0		0	
L)	MEMBER-BD OF TRUST UNTIL 08/12 JEFFREY R GURAL	1.00	Х						0		0	
2)	MEMBER - BOARD OF TRUSTEES RONALD WEINER	1.00	Х						0		0	
3)	MEMBER-BD OF TRUST UNTIL 08/12 JAMSHED BHARUCHA	35.00	Х						0		0	
1)	PRESIDENT THOMAS DRISCOLL	1.00	Х		Х				515,251.		0	144,15
5)	MEMBER - BOARD OF TRUSTEES CATHERINE HILL	1.00	Х						0		0	
b	MEMBER-BD OF TRUST FROM 06/13 Sub-total		X					•	0 0)	0	
	Total from continuation sheets to Part VII, Se Total (add lines 1b and 1c)								2,173,833. 2,173,833.		0	459,42
	Total number of individuals (including but not in reportable compensation from the organization Did the organization list any former offic employee on line 1a? <i>If "Yes," complete Schedu</i>	n ► er, directo	61 r, or	tru	iste	e,	key e	emp	bloyee, or highes	t compensa	ted	Yes 3
	For any individual listed on line 1a, is the sorganization and related organizations grain individual	eater than	\$15 •••		00? • •	• If • •	"Yes	;," • •	complete Schedu	le J for su	ıch • •	4 X
	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye ction B. Independent Contractors											5
	Complete this table for your five highest com compensation from the organization. Report c year.											
	(A) Name and business add	ress							(B) Description of se	ervices	Co	(C) empensation
	TACHMENT 2											
Υ								_				

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(A) Name and title	(B) Average hours per week (list any hours for related	box,	unles er and	Pos heck ss pe d a d	erson lirect	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
) RACHEL WARREN	1.00									
MEMBER-BD OF TRUST. FROM 12/13		X						0	C)
) JEREMY WERTHEIMER	1.00									
MEMBER-BD OF TRUST. FROM 12/12	1 0 0	X						0	C	
) EDGAR MOKUVOS MEMBER-BD OF TRUST. FROM 12/12	1.00	X						0	C	
D) ANTHONY VIDLER DEAN SCHOOL OF ARCHITECTURE	35.00	-		X				250,287.	C	37,28
)) THERESA C WESTCOTT	35.00									
VP FINANCE & ADMIN. & TREAS.	1.00			Х				243,217.	C	53,72
) LAWRENCE CACCIATORE	35.00									
SECRETARY TO BOARD OF TRUSTEES	1.00			Х	<u> </u>			184,794.	C	31,13
DEREK WITTNER	35.00	-							_	0.5.05
VP OF DEVELOPMENT	1.00			X				265,000.	(25,92
) JUDITH SASKIA BOS	35.00	-						217 000		51 F3
DEAN SCHOOL OF ART) WILLIAM GERMANO	35.00			-		Х		217,998.		34,53
DEAN HUMANITIES&SOCIAL SCIENCE		1				Х		203,893.	()	49,26
) SIMON BEN AVI	35.00			-			-	200,090.		49,20
PROF. ENGINEERING UNTIL 07/12	1.00	1				Х		119,315.	0	39,54
) JAMEEL AHMAD	35.00							,		_ ,
PROFESSOR CIVIL ENGINEERING						Х		174,078.	C	43,87
b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)								polyod more the	¢100.000 -f	
Total number of individuals (including but not reportable compensation from the organization Did the organization list any former offic employee on line 1a? <i>If "Yes," complete Schede</i>	n ► er, directo ule J for suc	61 or, or ch ind	tru lividu	uste ual	e,	key e	emp	loyee, or highes	t compensated	Yes M
For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than accrue co	\$15 mpen	50,0 sati	00? • • on f	from	‴Yes ₁any	; <i>"</i> • • un	complete Schedu related organizatio	le J for such	4 X
for services rendered to the organization? If "Ye ection B. Independent Contractors	es," comple	te Sch	nedu	ıle J	for	such	per	son	<u></u>	5
Complete this table for your five highest com compensation from the organization. Report o year.										
(A) Name and business add	Iress							(B) Description of se	ervices ((C) Compensation
							+			

Par	t VII	Statement of Reven Check if Schedule O co		nse to any questi	on in this Part VIII			
			· ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributi All other contributions, gifts, grants	1b 1c 1d ions) 1e s, 1c	705,640.				
Contr and O	g h	and similar amounts not included a Noncash contributions included in Total. Add lines 1a-1f	lines 1a-1f: \$	1,742,548.	8,988,209.			
evenue	2a	TUITION AND STUDENT FEES		Business Code	3,421,111.	3,421,111.		
Program Service Revenue	b c d							
rogram (e f	All other program service reve			2 401 111			
	<u>g</u> 3	Investment income (including other similar amounts)	ı dividends, inter	est, and ▶	3,421,111.		-226.	33,066,567.
	4 5	Income from investment of ta Royalties • • • • • • • • • • • • • • • • • • •			0			
	6a b c	Gross rents	1,837,294.					
	d 7a	Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	1,837,294.			1,837,294.
	b c	Less: cost or other basis and sales expenses Gain or (loss)	43,400,618. 5,065,797.					
nue	d 8a	Net gain or (loss) Gross income from fundrais events (not including \$	sing		5,065,797.			5,065,797.
Other Revenue	_	of contributions reported on li See Part IV, line 18	ne 1c).					
Othe	С	Less: direct expenses Net income or (loss) from fund Gross income from gaming ac	draising events . ctivities.	· · · · · · · •	0			
	b c	See Part IV, line 19 Less: direct expenses Net income or (loss) from gar	b		0			
	10a	Gross sales of inventor returns and allowances	a					
	b c	Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu	es of inventory	► Business Code	0			
	11a b	AUXILIARY INCOME OTHER REVENUE		532000 611710	1,867,650. 514,932.	1,867,650. 514,932.		
	c d	All other revenue			2,382,582.			
	е 12	Total revenue. See instruction			54,761,334.	5,803,693.	-226.	39,969,658.

JSA 2E1051 1.000

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX (B) Program service (C) Management and (A) Total expenses (D) Do not include amounts reported on lines 6b, 7b, Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 . Grants and other assistance to individuals in 2 784,809. 784,809. the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 ſ Benefits paid to or for members 4 Compensation of current officers, directors, 5 1,446,211. 1,053,138. 393,073. trustees, and key employees 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 22,129,124. Other salaries and wages 18,996,639. 1,633,898. 1,498,587. 7 8 Pension plan accruals and contributions (include section 1,726,829. 1,455,283. 141,638 129,908. 401(k) and 403(b) employer contributions) 5,951,796 4,594,882. 897,605 459,309. Other employee benefits 9 1,575,503. 1,327,753. 129,226. 118,524. 10 Fees for services (non-employees): 11 a Management 635,748 635,748. 789,821 789,821. c Accounting 102,000. 102,000. d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 232,925. 232,925. a Other, (If line 11g amount exceeds 10% of line 25, column 5,687,842. 4,340,656. 1,163,623. 183,563. (A) amount, list line 11g expenses on Schedule O.) 190,226. 183,359 3,015. 12 Advertising and promotion 3,852 1,295,361. 1,054,343. 68,493. 172,525. 13 16,647. 16,647. 14 Information technology 15 Royalties 2,781,671 2,231,920. 287,161 262,590. 16 Occupancy 196,961. 137,871. 21,181 37,909. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 486,920. 104,477. 39,817 342,626. 19 Conferences, conventions, and meetings 10,272,500. 7,944,373. 1,628,424. 699,703. 20 Interest 21 8,525,384. 8,256,274. 214,489 54,621. 22 Depreciation, depletion, and amortization 545,177. 428,112. 66,182. 50,883. 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 792. 315,159. 475. a STUDENT_SERVICES_____ 316,426. b LIBRARY_CONSORTIUM_____ 233,213. 233,213. 45,970 45,970 c LIBRARY BOOKS & PERIODICALS d MISCELLANEOUS ADMIN_____ 496,553. 171,669. 242,495. 82,389. e All other expenses _____ 66,465,617. 52,725,409 9,250,508 4,489,700. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if

JSA 2E1052 1.000

following SOP 98-2 (ASC 958-720)

Page **11**

Form	990	(2012)	
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Part	<u> </u>	Balance Sheet				Page 11
an	^	Check if Schedule O contains a response t	o anv	question in this Part	۲X	
			<u>o any</u>		(A) Beginning of year	(B) End of year
	1	Cash - non-interest-bearing			24,690,115. 1	16,776,355.
	2	Savings and temporary cash investments			5,391,692. 2	4,973,842.
	3	Pledges and grants receivable, net	•••		1,662,367. 3	1,143,148.
	4	Accounts receivable, net	• • •		0 4	
	5	Loans and other receivables from current and the	orme	officers, directors,		
		trustees, key employees, and highest co	mper	sated employees.		
		Complete Dert II of Schedule I			0 5	
	6	Loans and other receivables from other disqualified persi 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu organizations (see instructions). Complete Part II of Sche	and contary e	ontributing employers employees' beneficiary	0 6	
ets	7	Notes and loans receivable, net			1,266,533. 7	1,838,004
Assets	8	Inventories for sale or use	•••		0 8	
- 1	9	Prepaid expenses and deferred charges			9,705,693. 9	9,141,079
1	0 a	Land, buildings, and equipment: cost or		-		
			10a	271,193,080.		
	b	Less: accumulated depreciation			190,477,844. 10c	182,531,195
1		Investments - publicly traded securities			25,556,316. 11	33,401,646
1	2	Investments - other securities. See Part IV, line 11			635,732,409. 12	654,674,941
1	3	Investments - program-related. See Part IV, line 11			0 13	
1	4	Intangible assets			0 14	
1	5	Other assets. See Part IV, line 11			0 15	
1	6	Total assets. Add lines 1 through 15 (must equal			894,482,969. 16	904,480,210
1	7	Accounts payable and accrued expenses			32,804,097. 17	29,231,493
1	8	Grants payable			0 18	
1	9	Deferred revenue			105,364,580. 19	104,133,298
2	0	Tax-exempt bond liabilities			0 20	
စ္မ 2	1	Escrow or custodial account liability. Complete Pa	art IV c	f Schedule D	0 21	
Ē 2	2	Loans and other payables to current and for	rmer	officers, directors,		
Liabilities		trustees, key employees, highest compen-	sated	employees, and		
		disqualified persons. Complete Part II of Schedule	L		0 22	
2	3	Secured mortgages and notes payable to unrelate			175,000,000. 23	175,000,000
2	4	Unsecured notes and loans payable to unrelated to			0 24	
2	5	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on lines		· · ·		
		of Schedule D			5,078,940. 25	5,893,636
2	6	Total liabilities. Add lines 17 through 25			318,247,617. 26	314,258,427
ces		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and		there ► 🔯 and		
<u>a</u> 2		Unrestricted net assets			-82,635,528. 27	-93,844,707
82 a		Temporarily restricted net assets			591,541,467. 28	614,377,920
<u>e</u> 2	9	Permanently restricted net assets			67,329,413. 29	69,688,569
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.				
រដ្ឋ 3	0	Capital stock or trust principal, or current funds			30	
8 8 3	1	Paid-in or capital surplus, or land, building, or equ	ipmen	t fund	31	
₹ 3	2	Retained earnings, endowment, accumulated inco	ome, d	or other funds	32	
۶ S	3	Total net assets or fund balances			576,235,352. 33	590,221,783
3	4	Total liabilities and net assets/fund balances			894,482,969. 34	904,480,210.

THE COOPER UNION FOR THE ADVANCEME	INT	OF

Form 9	90 (2012)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				Х	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		54,7		
2	Total expenses (must equal Part IX, column (A), line 25)	2		66,4	65,6	517.
3	Revenue less expenses. Subtract line 2 from line 1	3	_	11,7	04,2	283.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5	76,2	35,3	352.
5	Net unrealized gains (losses) on investments	5		21,5	06,4	125.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		4,1	84,2	289.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	5	90,2	21,7	'83.
Part						
	Check if Schedule O contains a response to any question in this Part XII		<u> </u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	i in			
_	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	• • • •		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	-			3.7	
	of the audit, review, or compilation of its financial statements and selection of an independent account			2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, e	explair	ו in			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	ו in		37	
	the Single Audit Act and OMB Circular A-133?	• • •		3a	Х	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the		Х	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits		3b	Λ	

SCHE	DU	LE	Α
(Form	990	or	990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department Internal Rev	t of the Treasury venue Service	► Attac	h to Form 990 or Form 990-				instruct	ions.			Open to Inspec		C
Name of t	the organization	THE COOPER UNION	I FOR THE ADVANCEM	IENT	OF			Emplo	yer iden			oer	
	E & ART			4		41		- !		-556	2985		
Part I			s (All organizations mu				,		uctions				
		•	cause it is: (For lines 1 th	-		•		'					
			association of churches		ed in s	section	170(b)(1)(A)(I)					
2 X			(1)(A)(ii). (Attach Schedul										
3	-		service organization descr			-							
4		search organization op e, city, and state:	erated in conjunction wi	ith a h	nospita	l descr	ibed in	sectio	n 170(k	o)(1)(A	A)(iii).	Enter	the
5			nefit of a college or univ	ersitv	owned		erated k		vernme	ntal u	nit des	cribe	d in
	-)(1)(A)(iv). (Complete F	-	orony	0			sy a go		inter a			u
6			or governmental unit des	cribod	in soct	tion 17()/b)/1)/	A)(v)					
7		-	es a substantial part of it						hit or fro	om the	a aana	ral nu	ublic
' 🗀	-	ection 170(b)(1)(A)(vi).		o oupp		in a ge					s gene		Dife
8			on 170(b)(1)(A)(vi). (Com	nloto E	Dart II)								
9	-		es: (1) more than 331/3 %	-			contrib	utione	momb	orchin	foor	and a	rocc
<u> </u>	-		esempt functions - sub									-	
	-		ome and unrelated busi	-			-						
		•					•		11 511	(ax) 1		usines	1969
10		-	ne 30, 1975. See section			-		-	`				
10	-		ted exclusively to test for rated exclusively for the	-	-				-	or t	o oorn	(out	the
· ·	•	• ·	apported organizations de			•					-		
			bes the type of supporting					-				300	lion
	a Type I		c Type III-Function	-					I-Non-fu	-		oarat	od
e			the organization is not	-	-							0	
•			gers and other than one			-		-	-			-	
		ection 509(a)(2).			ic put	Jilling 30	ipportee	a organ	120110113	ucst		11 300	tion
f			n determination from th	e IRS	that it	is a T	vne I T	vne II	or Typ	ه ااا م	unnort	ina	
•	organization, c							ype n,	or typ	C III 3	uppon	Γ	
a	-		nization accepted any gif					the		• • •		•• L	
g	following perso	=	mzation decepted any gir		intributi		r any or	ine					
			ectly controls, either alor	ne or t	ogethe	er with	person	s desc	ribed in	(ii)		Yes	No
	., .	•	dy of the supported organ		-		percen	0 0000		(")	11g(i)		
		nember of a person de			•••	• • • •	• • • •				11g(ii)		
			son described in (i) or (ii) a				• • • •		• • • •	• • •	11g(iii)		
h		• •	out the supported organization						• • • •	•••			
	ame of supported		(iii) Type of organization	1	/· Is the		you notify	(vi)	Is the	(vii) 4	Amount o	fmone	
	organization	() =	(described on lines 1-9	organi	zation in listed in	the org	anization	organi	zation in		suppo		tur y
			above or IRC section (see instructions))	your g	overning		l. (i) of upport?		rganized U.S.?				
				Yes	Mo	Yes	No	Yes	No				
(A)													
(B)													
(C)													
(D)													
(E)													

Total

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

OMB No. 1545-0047

Open to Public

2

2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support	F	1	I	Т	1	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2012 (li					14	%
15	Public support percentage from 2011					15	%
16a	331/3% support test - 2012. If the c	-					
_	this box and stop here. The organizati	•		-			
b	331/3% support test - 2011. If the o						
4 -	check this box and stop here . The org	-					
17a	10%-facts-and-circumstances test - 2	-	-				
	10% or more, and if the organization					•	
	Part IV how the organization meets t			-	-		
	organization						•••• •
b	10%-facts-and-circumstances test - 2		-				
	15 is 10% or more, and if the organizati						-
	Explain in Part IV how the organization				-	-	
18	supported organization						
	instructions						

Schedule A (Form 990 or 990-EZ) 2012

13-5562985

Schedule A (Form 990 or 990-EZ) 2012

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e	2012	(f) ⊤o	otal
1	Gifts, grants, contributions, and membership fees								
	received. (Do not include any "unusual grants.")								
2	Gross receipts from admissions, merchandise								
	sold or services performed, or facilities								
	furnished in any activity that is related to the								
	organization's tax-exempt purpose								
3	Gross receipts from activities that are not an								
	unrelated trade or business under section 513								
4	Tax revenues levied for the								
	organization's benefit and either paid								
	to or expended on its behalf								
5	The value of services or facilities								
-	furnished by a governmental unit to the								
	organization without charge								
6	Total. Add lines 1 through 5								
	Amounts included on lines 1, 2, and 3								
a	received from disgualified persons								
b	Amounts included on lines 2 and 3								
	received from other than disqualified								
	persons that exceed the greater of \$5,000								
	or 1% of the amount on line 13 for the year								
с 8	Add lines 7a and 7b.								
5	Public support (Subtract line 7c from								
	line 6.)								
	••	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(0	2012	(f) To	ntal
	ndar year (or fiscal year beginning in) ►	(a) 2000	(6) 2000	(0) 2010	(0) 2011	(0	12012	(1) 10	Juli
9 0 a	Amounts from line 6								
υa	payments received on securities loans,								
	rents, royalties and income from similar								
L-	sources								
D	Unrelated business taxable income (less								
	section 511 taxes) from businesses								
	acquired after June 30, 1975								
	Add lines 10a and 10b								
1	Net income from unrelated business activities not included in line 10b,								
	whether or not the business is regularly								
	carried on								
2	Other income. Do not include gain or								
	loss from the sale of capital assets								
	(Explain in Part IV.)								
3	Total support. (Add lines 9, 10c, 11,								
	and 12.)								
4	First five years. If the Form 990 is for	the organizatio	n's first, second,	third, fourth, or	fifth tax year a	s a se	ection 501	(c)(3)	
	organization, check this box and stop here							<u></u>	
2	tion C. Commutation of Dublic Cum	port Percent	age						
60	tion C. Computation of Public Sup			mn (f))		15			%
		, column (f) divid	ed by line 13, colur						
5	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche								%
5	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche	edule A, Part III, lir	ne 15						%
5 3 ec	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investmen	edule A, Part III, lir nt Income Per	ne 15						%
5 3 ec 7	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (li	edule A, Part III, lir nt Income Per ne 10c, column (ne 15	13, column (f))		16			
5 6 ec 7 8	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (li Investment income percentage from 2011	edule A, Part III, lin nt Income Per ne 10c, column (Schedule A, Part	ne 15	13, column (f))	· · · · · · · · · · · · · · · · · · ·	16 17 18	331/3%.	and line	%
5 6 ec 7 8	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (li Investment income percentage from 2011 331/3% support tests - 2012. If the or	edule A, Part III, lin nt Income Per ne 10c, column (Schedule A, Part ganization did n	re 15 centage (f) divided by line 1 III, line 17 ot check the box	13, column (f))	d line 15 is more	16 17 18 e than			%
5 6 7 7 8 9 a	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (li Investment income percentage from 2011 331/3% support tests - 2012. If the or 17 is not more than 331/3%, check th	edule A, Part III, lin nt Income Per ne 10c, column (Schedule A, Part ganization did n is box and sto	re 15 rcentage (f) divided by line 1 III, line 17 ot check the box p here. The orga	13, column (f))	d line 15 is more s as a publicly	16 17 18 e than suppor	ted organi	zation	%
5 6 ec 7 8 9 a	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (li Investment income percentage from 2011 331/3% support tests - 2012. If the or 17 is not more than 331/3%, check th 331/3% support tests - 2011. If the orga	edule A, Part III, lin nt Income Per ne 10c, column (Schedule A, Part ganization did n is box and sto anization did not	re 15 reentage (f) divided by line 1 III, line 17 ot check the box p here. The organ check a box on 1	13, column (f)) on line 14, and anization qualifie line 14 or line 15	d line 15 is mora s as a publicly Da, and line 16 is	16 17 18 e than suppor	ted organi than 331/3	zation 3%, and	%
5 6 7 8 9 a	Public support percentage for 2012 (line 8 Public support percentage from 2011 Sche tion D. Computation of Investment Investment income percentage for 2012 (li Investment income percentage from 2011 331/3% support tests - 2012. If the or 17 is not more than 331/3%, check th	edule A, Part III, lin nt Income Per ne 10c, column (Schedule A, Part ganization did n is box and sto anization did not this box and s	reentage (f) divided by line 1 III, line 17 ot check the box p here. The organ check a box on 1 top here. The organ	 I3, column (f)) I3, column (f)) I3, column (f)) I3, column (f) I3, column (f) I3, column (f) I4, column (f)	d line 15 is more s as a publicly Da, and line 16 is es as a publicly	16 17 18 e than suppor s more suppo	ted organi than 331/3 rted organi	zation 3 %, and zation	% % ►□

Page 4

Schedule A (Form 990 or 990-EZ) 2012

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule B

Name of the organizatio	n
Department of the Treasury Internal Revenue Service	
or 990-PF)	
(Form 990, 990-EZ,	

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

Employer identification number

13-5562985

THE	COOE	PEF	R UNION	FOR	THE	ADVANCEMENT	OF
SCIE	INCE	&	ART				

Organization type (check one):

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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization 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 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions 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 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total 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. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE & ART

Page **2**

Employer identification number

13-5562985

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$ \$ 225,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$269,000.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$ \$1,050,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$197,764.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5		\$1,473,548.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$ 200,785.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

JSA

Name of organization THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE & ART

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Х 7 Person Payroll 200,000. \$ Noncash (Complete Part II if there is a noncash contribution.) (c) (a) (b) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Х 8 Person Payroll 200,000. \$ Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (C) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 9 Х Person Payroll 200,000. Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II if there is a noncash contribution.) (a) (b) (C) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Employer identification number

13-5562985

JSA

Schedule B (For	rm 990, 990-EZ, or 990-PF) (2012)		Pag
lame of orgai	nization THE COOPER UNION FOR THE ADVANCEMENT OF	Employer id	dentification number
	SCIENCE & ART		13 - 5562985
Part II No	oncash Property (see instructions). Use duplicate copies of F	Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	40 DUOMOCDADUG LEON LEVINGMETN FOD		

2_	49 PHOTOGRAPHS, LEON LEVINSTEIN FOR EDUCATIONAL PURPOSES FOR A MINIMUM OF 3 YEARS	\$ <u>\$</u> \$	_12/20/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5_	SEE SCHEDULE O	\$ <u>1,473,548.</u>	_5/22/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

JSA

2214478

Page 3

	Form 990, 990-EZ, or 990-PF) (2012) ganization THE COOPER UNION FOR T	HE ADVANCEMENT OF		Page 4 Employer identification number 13–5562985				
t F	SCIENCE & ART Exclusively religious, charitable, etc., that total more than \$1,000 for the ye For organizations completing Part III, e	ear. Complete columns (and the total of exclusive	a) through (e) an /y religious, char	c)(7), (8), or (10) organizations d the following line entry. itable, etc.,				
	contributions of \$1,000 or less for the Use duplicate copies of Part III if additio	•	tion once. See in	structions.) ►\$				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
			·					
		(e) Transfer of g	ift					
	Transferee's name, address, an	d ZIP + 4	Relationshi	o of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
			·					
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	 		·					
	(e) Transfer of gift							
	Transferee's name, address, an	d ZIP + 4	Relationshi	p of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
JSA			Sc	hedule B (Form 990, 990-EZ, or 990-PF) (2012)				

2E1255 1.000 108380 2231 5/7/2014 9:23:34 AM V 12-7.12 2214478

1 2	•	expended by the filing organization	for costion 507 a							
2	11 M	· · · · · · · · · · · · · · · · · · ·	for section 527 es	xempt function						
2	activities ▶ \$									
2	Enter the amount of the filing organization's funds contributed to other organizations for section									
		es								
3		enditures. Add lines 1 and 2. En		· .						
4		e Form 1120-POL for this year?								
5	organization made payment the amount of political conf	and employer identification numb s. For each organization listed, en tributions received that were prom nd or a political action committee	ter the amount pair ptly and directly de	d from the filing organizelivered to a separate po	zation's funds. Also enter olitical organization, such					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0					
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
For I	Paperwork Reduction Act Notice, se	e the Instructions for Form 990 or 990-EZ.		Schedul	e C (Form 990 or 990-EZ) 2012					
JSA 2E12	64 1.000									
	108380 2231 5/7/20	014 9:23:34 AM V 12-	7.12	2214478	PAGE 2					

Political Campaign and Lobbying Activities

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

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

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE C

► See separate instructions.

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

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-A only.

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

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

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

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

Name of organization THE COOPER UNION FOR THE ADVANCEMENT OF Employer identification number SCIENCE & ART 13-5562985 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 1 2 Volunteer hours 3 Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955.... **>** \$ 1 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Yes No Yes No b If "Yes," describe in Part IV. No filing enter such IV. ical

Open to Public Inspection

OMB No. 1545-0047

Sch	edule C (Form 990 or 990-EZ) 2012	OPER UNION FOR THE ADVANCEMENT O	E 13-5:	262985 Page Z
Pa	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
	name, address, EIN, exp	belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend checked box A and "limited control" provisi	litures).	oup member's
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
(Total lobbying expenditures to influence Total lobbying expenditures (add lines Other exempt purpose expenditures Total exempt purpose expenditures (add lines) 	e public opinion (grass roots lobbying) e a legislative body (direct lobbying) 1a and 1b)		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
ç	g Grassroots nontaxable amount (enter	25% of line 1f)		
I	 Subtract line 1g from line 1a. If zero or 			
i	Subtract line 1f from line 1c. If zero or			
j		o on either line 1h or line 1i, did the organiz		
	reporting section 4911 tax for this yea	?		Yes No

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

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

Schedule C (Form 990 or 990-EZ) 2012

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Page	J

Sche	aule C (Form 990 or 990-EZ) 2012			Paç
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d Foi	m 5768
- Far	-	(i	a)	(b)
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?		Х	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х	

Media advertisements? Mailings to members, legislators, or the public?

Grants to other organizations for lobbying purposes?

Publications, or published or broadcast statements?

g	Direct contact with legislators, their staffs, government officials, or a legislative body?			105,	,696
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i			105,	,696
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Ра	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or 501(c)(6).	sectio	n	_	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		. 1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		. 2		
3					
Ра	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Pa	art III-	A, line	e 3, is	
	answered "Yes."		. <u> </u>		
1	Dues, assessments and similar amounts from members	1	 		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of				
	political expenses for which the section 527(f) tax was paid).		1		
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?	4	1		

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

SEE PAGE 4

5

5

Part IV

С

d

е

f

Taxable amount of lobbying and political expenditures (see instructions)

Supplemental Information

Page 4

Schedule C (Form 990 or 990-EZ) 2012

Part IV Supplemental Information (continued)

SUPPLEMENTAL INFORMATION

SCHEDULE C, PART II-B, LINE 1G

THE COOPER UNION CONTRACTED WITH A FIRM THAT SPECIALIZES IN GOVERNMENT RELATIONS AND COMMUNITY AFFAIRS. IN COORDINATION WITH COOPER UNION, THAT FIRM SHARED INFORMATION WITH MEMBERS OF THE NEW YORK CITY COUNCIL, THE NEW YORK CITY BOROUGH PRESIDENT, THE MAYOR'S OFFICE, NEW YORK STATE ASSEMBLY, NEW YORK STATE SENATE, AND RELEVANT CITY AND STATE AGENCIES REGARDING ISSUES THAT AFFECT COOPER UNION, AS WELL AS COOPER UNION ACTIVITIES THAT MAY AFFECT THE COMMUNITY.

SCHEDULE D		Supplem	ental Financial State	monte		OMB No. 1545-0047
(Form 990)						2012
			organization answered "Yes," t 9, 10, 11a, 11b, 11c, 11d, 11e, 1			Open to Public
	artment of the Treasury nal Revenue Service		Form 990. ▶ See separate instr		-	Inspection
Nam	e of the organization	THE COOPER UNION FOR T	HE ADVANCEMENT OF		Employer identific	
_	IENCE & ART				13-55629	
Ра		ti ons Maintaining Donor Adv i ion answered "Yes" to Form 9	sed Funds or Other Similar F	unds or A	Accounts. Con	plete if the
	organizati		(a) Donor advised funds		(b) Funds and	d other accounts
1	Total number at er	nd of year				
2		utions to (during year)				
3		from (during year)				
4		tend of year				
5	-		advisors in writing that the assets			
~	-		e organization's exclusive legal co			└── Yes └── No
6			d donor advisors in writing that g t of the donor or donor advisor, o			
	-		· · · · · · · · · · · · · · · · · · ·	-		🗌 Yes 🗌 No
Ра	rt Conservat	tion Easements. Complete if	the organization answered "Y	es" to For		
1	Purpose(s) of cons	servation easements held by the	organization (check all that apply).			
		of land for public use (e.g., recre	, , , , , , , , , , , , , , , , , , , ,			nportant land area
		natural habitat		ervation of	a certified histor	ric structure
2		of open space	eld a qualified conservation contri	ibution in t	he form of a cor	servation
2		ast day of the tax year.	a quained conservation contra			1301 Valion
		, ,			Held at the	End of the Tax Year
а	Total number of co	onservation easements		[2a	
b	Total acreage rest	ricted by conservation easements			2b	
С			historic structure included in (a) .	· · · ·	<u>2c</u>	
d			acquired after 8/17/06, and not		0.1	
3					2d	zation during the
3	tax year ►		sierreu, releaseu, extiriguisrieu, t			
4	,		rvation easement is located \blacktriangleright			
5			ing the periodic monitoring, inspe			
			sements it holds?			
6			specting, and enforcing conserva	ation ease	ments during the	year
7	Amount of expense		ting, and enforcing conservation	easement	s during the year	
•	►\$		and entering conservation	Suboment	s during the year	
8	Does each conser	vation easement reported on line	e 2(d) above satisfy the requireme	ents of sect	tion 170(h)(4)(B)	
	(i) and section 170	(h)(4)(B)(ii)?				└── Yes └── No
9	In Part XIII, descril	be how the organization reports	conservation easements in its rev	enue and e	expense stateme	
		d include, if applicable, the text o ounting for conservation easeme	f the footnote to the organization	i's financia	I statements that	describes the
Ра		· ·	of Art, Historical Treasures,	or Other	Similar Assets	
	Complete	if the organization answered	"Yes" to Form 990, Part IV, lin	e 8.		-
1a	If the organization works of art, histo public service, prov	elected, as permitted under SF orical treasures, or other simila vide, in Part XIII, the text of the fo	AS 116 (ASC 958), not to repo ir assets held for public exhibit potnote to its financial statements	ort in its re ion, educa that desci	evenue statemer ation, or resear ribes these items	nt and balance sheet ch in furtherance of 5.
b	works of art, histe	orical treasures, or other simila	SFAS 116 (ASC 958), to report ir assets held for public exhibit ng to these items:	ion, educa	ation, or resear	ch in furtherance of
	(i) Revenues inclu	uded in Form 990, Part VIII, line 1			► \$	
	()				•	
2	•		t, historical treasures, or other FAS 116 (ASC 958) relating to th			al gain, provide the

		following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.	
	а	Revenues included in Form 990, Part VIII, line 1	
-	b	Assets included in Form 990, Part X 🖡 💲	

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THE COOPER UNION FOR THE ADVANCEMENT OF

b Contributions 2,359,156. 1,961,949. 3,094,242. 6,129,945. 651,344 c Net investment earnings, gains, and losses 53,076,837. 56,558,688. 54,263,574. 67,887,107. -50,338,776. d Grants or scholarships 27,425,791. 27,041,494. 27,453,533. 25,847,799. 24,113,799. e Other expenditures for facilities and programs	Schee	lule D (Form 990) 2012									Page 2
collection terms (check all that apply): d Loan or exchange programs b is Scholarly research e Other c Image: Collection of future generations e Other 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. Suring the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be soil to raise funds rather than to be maintained as part of the organization's collection? Image: image	Par	t III Organizations Maintainir	ng Collections o	of Art, His	storical	Treasure	s, or Ot	her Simil	ar Ass	ets (con	tinued)
a Public exhibition d Loan or exchange programs b is Scholarly research o Other c Preservation for hubre generations o Other 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part Xill. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X2,	3			other reco	rds, checł	c any of t	he follow	ving that a	re a sigr	nificant us	e of its
b Scholarly reservation of hubure generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part Xil. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection?			/):		_						
c ∑ Prevervation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funds rather than to be mainlaned as part of the organization scollection?	а			d							
 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be soid to raise funds raher than to be maintained as part of the organization answered "Yes" to Form S90, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodial arrangements. Complete if the organization answered "Yes" to Form S90, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990 Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1d 1d 2d Additons during the year. 1d 1d 2d Additons during the year. 1d 2d Id the organization include an amount on Form 990, Part X, line 21? 1d Implement IP Part XIII. Check here if the explanation has been provided in Part XIII. 2d Endowment Funds. Complete if the organization answered "Ves" to Form 990. Part X, line 10. 2d Staffuctions	b			e	Other						
XII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection?	С										
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Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 90. Part X2. Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Yes No c Beginning balance Included on Form 90. Part X2. Included on Form 90. Part X2. No d Additions during the year Include on Form 900, Part X2. Include on Form 900, Part X2. No d It frequencies (Include an amount on Form 900, Part X, line 21? Yes No D Its through the year	5	During the year, did the organization	n solicit or receive	donations o	of art, histo	orical trea	sures, or	other simila	ar		
Ine 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance Image: Complete III Part XIII and complete the following table: c Beginning balance Image: Complete III Part XIII and complete the following table: c Additions during the year Image: Complete III Part XIII and complete the following table: c Beginning balance Image: Complete III the complete III Strong table (0) Four years back (0) Four ye		assets to be sold to raise funds rathe	er than to be maint	ained as pa	art of the o	organizati	on's colle	ction?	[Yes	X No
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Included on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XII and complete the following table: Amount Image: Complete the following table: Amount c Beginning balance Image: Complete the following table: Amount Image: Complete the following table: Im		line 9, or reported an amo	ount on Form 990	0, Part X, I	ine 21.						
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b Contributions 2,359,156. 1,961,949. 3,094,242. 6,129,945. 651,344. c Net investment earnings, gains, and losses 53,076,837. 56,558,688. 54,263,574. 67,887,107. -50,338,776. d Grants or scholarships											
c Net investment earnings, gains, and losses	1a	Beginning of year balance	640,535,544.				2,118.	530,982	,865.	604,78	34,097.
and losses 53,076,837. 56,558,688. 54,263,574. 67,887,107. -50,338,776. d Grants or scholarships 27,425,791. 27,041,494. 27,453,533. 25,847,799. 24,113,799. e Other expenditures for facilities and programs 668,545,746. 640,535,544. 609,056,401. 579,152,118. 530,982,866. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% 0.0000 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment ▶90.0000 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a (ii) x 3a(ii) x 4 Describe in Part XIII the intended uses of the organizations isted as required on Schedule R? 3b 3b 3b 4 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land · · · · · · · · · · · · · · · · · · ·	b	Contributions	2,359,156.	1,96	1,949.	3,09	4,242.	6,129	,945.	6.	51,344
d Grants or scholarships 27, 425, 791. 27, 041, 494. 27, 453, 533. 25, 847, 799. 24, 113, 799. e Other expenditures for facilities and programs	С	Net investment earnings, gains,									
e Other expenditures for facilities and programs		and losses	53,076,837.	56,55	8,688.	54,26	3,574.	67,887	,107.	-50,33	38,776.
and programs	d	Grants or scholarships	27,425,791.	27,04	1,494.	27,45	3,533.	25,847	,799.	24,11	L3,799.
f Administrative expenses	е	Other expenditures for facilities									
f Administrative expenses		and programs									
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶90.0000 % c Temporarily restricted endowment ▶90.0000 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value a Land	f	Administrative expenses									
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a Board designated or quasi-endowment ▶% b Permanent endowment ▶	2										<u> </u>
b Permanent endowment ▶10.0000 % c Temporarily restricted endowment ▶90.0000 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . (ii) related organizations . b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land . 150,000. 150,000. b Buildings . 30,01,629. 2,101,692. a Says, 594,233. 58,721,500. 176,872,733. c Leasehold improvements. 32,395,105. 27,838,693. 4,556,412. e Other 52,113. 52,113. 52,113. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).). 182,531,195. <td>а</td> <td></td> <td></td> <td>%</td> <td></td> <td>(</td> <td>//</td> <td></td> <td></td> <td></td> <td></td>	а			%		(//				
c Temporarily restricted endowment ▶90.0000_% The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated degreciation (d) Book value (a) Cost or other basis (other) (c) Accumulated degreciation (d) Book value (a) Cost or other basis (other) (c) Accumulated degreciation (d) Book value (a) Cost or other basis (other) (c) Accumulated degreciation (d) Book value (a) Cost or other basis (other) (c) Accumulated degreciation (d) Book value (a) Cost or other basis (other) (c) Accumulated (degreciation degree) (d) Book value (a) Cost or other basis (other) (c) Accumulated (degreciation degree) (d) Book value (e	b			^ *							
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3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) cost or other basis (iii) cost or other basis (iii) cost or other basis (other) (c) Accumulated depreciation (d) Book value (iii) restriction (iii) cost or other basis (other) (c) Accumulated depreciation (d) Book value (iii) restriction (iii) restriction (iii) cost or other bas											
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Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 150,000. 150,000. 150,000. b Buildings 235,594,233. 58,721,500. 176,872,733. c Leasehold improvements 3,001,629. 2,101,692. 899,937. d Equipment 32,395,105. 27,838,693. 4,556,412. e Other 52,113. 52,113. 52,113. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 182,531,195.											
(investment) (other) depreciation 1a Land · · · · · · · · · · · · · · · · · · ·							(c) Ac	cumulated	((d) Book value	<u> </u>
b Buildings 235,594,233. 58,721,500. 176,872,733. c Leasehold improvements. 3,001,629. 2,101,692. 899,937. d Equipment 32,395,105. 27,838,693. 4,556,412. e Other 52,113. 52,113. 52,113. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).). 182,531,195.											-
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c Leasehold improvements	_	Buildings						21,500.			
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Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 182,531,195.	e	• •						,			
	Tota			m 990. Part	X, columr						
							. , , - •	1			

Schedule D (Form 990) 2012

Page 3

Part VII	Investments - Other Securities. See F	orm 990, Part X, line 1	12.	
(a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A) HEDG	E FUNDS	27,314,618.	FMV	
(B) LIMI	TED PARTNERSHIPS	44,647,849.	FMV	
(C) REAL	STATE AND OTHER	572,387,026.	FMV	
(D) FUNE	S OF FUNDS	10,325,448.	FMV	
(E)				
(F)				
(G)				
(H)				
(I)				
	(b) must equal Form 990, Part X, col. (B) line 12.)	654,674,941.		
Part VIII	Investments - Program Related. See F	orm 990, Part X, line	13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuatio Cost or end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, li	ine 15.		
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	ma (h) must savel Form 000 Port X sol (P)	line (E)		
	nn (b) must equal Form 990, Part X, col. (B) I		•••••••••••••••••••••••••••••••••••••••	
Part X	Other Liabilities. See Form 990, Part X	(b) Book value		
1.	(a) Description of liability		-	
\rightarrow	I income taxes	5,893,63	6	
_ ` ` /	LIII UNDER CHARITABLE IRUSI		<u>.</u>	
(3)			-	
(4)			-	
(5)			-	
(6)			-	
(7)			-	
(8)				
(9)				
(10)				
(11) Total (Column	(h) must squal Form 000. Port V and (D) line 05.		6	
	n (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 5,893,63		
	SC 740) Footnote. In Part XIII, provide the text certain tax positions under FIN 48 (ASC 740). Che			
naonity 101 uno			anote has been provided in Fait Alli	

Schedu	le D (Form 990) 2012		Page 4			
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return						
1	Total revenue, gains, and other support per audited financial statements	1	77,878,067.			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments 2a 21, 506, 425.					
b	Donated services and use of facilities 2b					
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.) 2d 1,610,308.					
е	Add lines 2a through 2d	2e	23,116,733.			
3	Subtract line 2e from line 1	3	54,761,334.			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a					
b	Other (Describe in Part XIII.)					
		4.0				
	Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 12.</i>)	4c	EA 761 224			
5		5	54,761,334.			
Part			CO 100 417			
1	Total expenses and losses per audited financial statements	1	68,182,417.			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities 2a					
b	Prior year adjustments 2b					
С	Other losses 2c					
d	Other (Describe in Part XIII.) 2d 1,716,800.					
е	Add lines 2a through 2d	2e	1,716,800.			
3	Subtract line 2e from line 1	3	66,465,617.			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a					
b	Other (Describe in Part XIII.) 4b					
С	Add lines 4a and 4b	4c				
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)	5	66,465,617.			
Part		-	<u> </u>			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.						
SE	e page 5					
			_			

Schedule D (Form 990) 2012

ENDOWMENT FUNDS

PART V, LINE 4:

ENDOWMENT FUNDS ARE USED IN ACCORDANCE WITH DONORS' WISHES TO SUPPORT THE MISSION OF THE ACADEMIC INSTITUTION.

PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE FROM THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND ART:

THE COLLEGE AND THE C.V. STARR RESEARCH FOUNDATION AT THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND ART, INC. ARE EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ASTOR PLACE IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(2) OF THE INTERNAL REVENUE CODE. THE COOPER UNION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. THE COOPER UNION EVALUATES, ON AN ANNUAL BASIS, THE EFFECTS OF ANY UNCERTAIN TAX POSITIONS ON ITS FINANCIAL STATEMENTS. AS OF JUNE 30, 2013 AND 2012, THE COOPER UNION HAS NOT IDENTIFIED OR PROVIDED FOR ANY SUCH POSITIONS.

Schedule D (Form 990) 2012

PART XIII, LINE 2D:

DECONSOLIDATION OF COOPER UNION FROM CONSOLIDATED FINANCIAL STATEMENT

TOTALS:

ELIMINATION OF ASTOR-RELATED ENTITY	REVENUES:	1,108,949
ELIMINATIOIN OF C.V. STARR RESEARCH	FOUNDATION	
RELATED REVENUES:		501,359
		1,610,308

PART XII, LINE 2D:

DECONSOLIDATION OF COOPER UNION FROM CONSOLIDATED FINANCIAL STATEMENT TOTALS:

ELIMINATION OF ASTOR-RELATED ENTITY	REVENUES:	1,155,828
ELIMINATIOIN OF C.V. STARR RESEARCH	FOUNDATION	
RELATED REVENUES:		560 , 972
		1,716,800

Schedule D (Form 990) 2012

SCHED	OULE	Ε	
(Form	990	or	990-EZ)

Department of the Treasury Internal Revenue Service

Part I

Schools

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990),
Part IV, line 13, or Form 990-EZ, Part VI, line 48.	

► Attach to Form 990 or Form 990-EZ. OR THE ADVANCEMENT OF



Name of the organization			THE	COOPER	UNION	FOR
SCIENCE	&	ART				

Inployer	Internation
13-55	62985

			YES	NC
I	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?	1	X	
2	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?	2	X	
3	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, use Part II	3	Х	
	SEE SUPPLEMENTAL PAGE			
ļ	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with atudant admissions, programs, and appletables?	10	X	
d	with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	4c 4d	X	
u	If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4 0	21	
	Does the organization discriminate by race in any way with respect to:	_		
а	Students' rights or privileges?	<u>5a</u>		
b	Admissions policies?	5b		
С	Employment of faculty or administrative staff?	5c		2
d	Scholarships or other financial assistance?	5d		
е	Educational policies?	5e		
Ŭ		56		
f	Use of facilities?	5f		2
g	Athletic programs?	5g		
h	Other extracurricular activities?	5 h		
	Other extracurricular activities?	5h		
_			37	
	Does the organization receive any financial aid or assistance from a governmental agency?	6a 6h	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		
	•			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			

108380 2231 5/7/2014 9:23:34 AM V 12-7.12

Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

PART I LINE 3:

THE COOPER UNION IS COMMITTED TO PROVIDING A LEARNING ENVIRONMENT FREE FROM UNLAWFUL DISCRIMINATION AND HARASSMENT AND TO FOSTERING A NURTURING AND VIBRANT SCHOOL FOUNDED UPON THE FUNDAMENTAL DIGNITY AND WORTH OF ALL ITS MEMBERS. CONSISTENT WITH THIS COMMITMENT AND WITH APPLICABLE LAWS, IT IS THE POLICY OF THE COOPER UNION NOT TO TOLERATE UNLAWFUL DISCRIMINATION OR HARASSMENT IN ANY FORM. PROCEDURES ARE PUBLISHED IN THE STAFF HANDBOOK AND ALSO AVAILABLE AT: HTTP://WWW.COOPER.EDU.

PART I LINE 6A:

BUNDY AID

\$65,968.00

2214478

SCH	EDULE F	Stater	nent of A	ctivities	Outside the Uni	ted States	OMB No. 1545-0047		
(Form 990) ► Complete if the organization answered " Part IV, line 14b, 15, or 10					n answered "Yes" to Form 9		2012		
Depart	ment of the Treasury		Attach t	-	14b, 15, or 16. ▶ See separate instructions.	r 16. rate instructions Open to Public			
	I Revenue Service of the organization TH	E COOPER	UNION FOR	THE ADVAN	CEMENT OF	Employer id	Inspection entification number		
SCIE	ENCE & ART					13-556			
Part		formation of Part IV, line 14		Outside the l	Jnited States. Complete	if the organization	answered "Yes" to		
	assistance, the grar	ntees' eligibili	ty for the grant	s or assistance	ubstantiate the amount o e, and the selection criter	ia used to award the			
	For grantmakers. assistance outside t			ganization's pi	rocedures for monitoring	the use of its gr	ants and other		
3		n. (The follov			e duplicated if additional sp				
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in a program service describe specific typ service(s) in regio	e of expenditures for and investments		
(1)	CENTRAL AMERICA/CA	RIBBEAN			INVESTMENTS		39,292,379.		
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
<u>(10)</u>									
<u>(11)</u>									
(12)									
(13)									
(14)									
<u>(15)</u>									
<u>(16)</u>									
(17)	0.1.4.5.5								
3a b	Sub-total Total from c sheets to Part I .	ontinuation					39,292,379.		
C	Totals (add lines						39,292,379.		
For Pa	aperwork Reduction	Act Notice, se	e the Instruction	s for Form 990.		Sc	hedule F (Form 990) 2012		

e, see the Instructions for Form 990 JSA 2E1274 1.000 108380 2231 5/7/2014 9:23:34 AM V 12-7.12 2214478

Part II	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2 Ente by ti	er total number of recipient orga ne IRS, or for which the grantee	anizations listed above or counsel has prov	ve that are recognized as o ided a section 501(c)(3) eo	charities by the quivalency lette	foreign country, re	cognized as ta	x-exempt		

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
0)							
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							

Part III Grants and Other Assistance to Individuals Outside the United States, Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Schedule F (Form 990) 2012

JSA

Page 3

THE COOPER UNION FOR THE ADVANCEMENT OF

Page	4

Sched	ule F (Form 990) 2012		Page 4
Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)</i>	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No
			Schedule F (Form 990) 2012

Page 5

Schedule F (Form 990) 2012

Part V Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

PART 1 LINE 3 COLUMN(F):

ACCOUNTING METHOD: ACCRUAL

Schedule F (Form 990) 2012

SCHEDULE I	
(Form 990)	

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

20**12** Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury

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

Internal Revenue Service Name of the organization

Name of the organization THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE & ART

13-5562985

Employer identification number

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
_(1) _		-								
_(2)										
_(3)										
_(4)										
_(5)		-								
_(6)		-								
_(7) _		-								
_(8)		-								
_ <u>(9)</u>		-								
(10)		-								
(<u>11)</u>		-								
(12)										
3 E	 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 									
For Pa	or Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2012)									

Schedule I (Form 990) (2012)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 GRANTS (UNDERGRADUATES & VISITING)	880.	616,313.		N/A	N/A
2 grants (graduates)	59.	41,321.		N/A	N/A
3 FEDERAL PELL GRANT	151.	647,750.		N/A	N/A
4 FEDERAL SEOG GRANT	27.	70,850.		N/A	N/A
5 PRIZES, INTERNSHIP & FELLOWSHIPS	88.	56,325.		N/A	N/A
6					
7					

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

SUPPLEMENTAL INFORMATION

THE TUITION RATE FOR ACADEMIC YEAR 2012-2013 WAS \$38,550. ALL

UNDERGRADUATES RECEIVED A SCHOLARSHIP CREDIT ON THEIR TUITION BILL FOR

THAT AMOUNT WHICH IS NOT REFLECTED ABOVE IN SCHEDULE I, PART III.

STUDENTS WHO CAN DEMONSTRATE NEED, AS CALCULATED BY THE FREE APPLICATION

FOR FEDERAL STUDENT AID, MAY BE ELIGIBLE FOR ADDITIONAL FINANCIAL AID.

COOPER UNION AWARDS FEDERAL PELL GRANTS, AND FEDERAL SEOG GRANTS, AS WELL

AS COOPER UNION GRANTS, TO STUDENTS WHO MEET THE ELIGIBILITY REQUIREMENTS

ESTABLISHED BY THE CURRENT TITLE IV REGULATIONS OF THE U.S. DEPARTMENT OF

EDUCATION, OFFICE OF FEDERAL STUDENT AID.

Schedule I (Form 990) (2012)

Page 2

JSA 2E1504 2.000

SCHEDULE J (Form 990) Compensation Information Department of the Treasury Internal Revenue Service For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 23. Attach to Form 990. See separate instructions.						OMB No. 1545-0047 20 12 Open to Public Inspection				
	Revenue Service of the organization		lentification			n				
	ENCE & ART		5562985		•					
Part		ons Regarding Compensation	0002000							
1a	990, Part VII, First-cla Travel fo Tax inde	ppropriate box(es) if the organization provided any of the following to or for a person listed in , Section A, line 1a. Complete Part III to provide any relevant information regarding these ite ass or charter travel for companions emnification and gross-up payments ionary spending account	ms. use		Yes	No				
b 2	If any of the or reimburse explain Did the organ	boxes on line 1a are checked, did the organization follow a written policy regarding personal services (e.g., maid, chauffeur, chef) boxes on line 1a are checked, did the organization follow a written policy regarding personal of the expenses described above? If "No," complete Pa nization require substantiation prior to reimbursing or allowing expenses incurred by all stees, and the CEO/Executive Director, regarding the items checked in line 1a?	rt III to officers,	1b 2	X X					
3	organization's related organ X Comper Indepen	h, if any, of the following the filing organization used to establish the compensation of the s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used b nization to establish compensation of the CEO/Executive Director, but explain in Part III. nsation committee Written employment contract ndent compensation consultant S of other organizations X Approval by the board or compensation committee	-							
4 a b c	organization of Receive a sev Participate in, Participate in,	ear, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing or a related organization: everance payment or change-of-control payment? a, or receive payment from, a supplemental nonqualified retirement plan? b, or receive payment from, an equity-based compensation arrangement? any of lines 4a-c, list the persons and provide the applicable amounts for each item in Pa		4a 4b 4c		X X X				
5 a b	For persons I compensation The organizat Any related o	501(c)(3) and 501(c)(4) organizations must complete lines 5-9. listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any n contingent on the revenues of: tion?		5a 5b		X X				
6 a b	For persons I compensation The organizat	e 5a or 5b, describe in Part III. listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any n contingent on the net earnings of: tion? organization?		6a 6b		XXX				
7 8	If "Yes" to line For persons payments not Were any am	e 6a or 6b, describe in Part III. listed in Form 990, Part VII, Section A, line 1a, did the organization provide any n t described in lines 5 and 6? If "Yes," describe in Part III nounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was al contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," of	on-fixed	7		X				
9 For Pa	in Part III .. If "Yes" to li Regulations s	line 8, did the organization also follow the rebuttable presumption procedure desc section 53.4958-6(c)?	ribed in	8 9	orm 99	X 0) 2012				

Page 2

Schedule J (Form 990) 2012

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

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

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

		(B) Breakdown	of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
ANTHONY VIDLER	(i)	212,176.	C	38,111.	24,112.	13,169.	287,568.	(
1 DEAN SCHOOL OF ARCHITECTURE	(ii)	C	QQ	0	d	0	((
JUDITH SASKIA BOS	(i)	186,380.	C	31,618.	21,630.	12,904.	252,532.	(
2 DEAN SCHOOL OF ART	(ii)	С	C	0	С	0	(
WILLIAM GERMANO	(i)	156,066.	d	47,827.	20,863.	28,398.	253,154.	
3 DEAN HUMANITIES&SOCIAL SCIENCE	(ii)	C	C	0	С	0	(
SIMON BEN AVI	(i)	105,304.	d	14,011.	11,842.	27,705.	158,862.	
4 PROF. ENGINEERING UNTIL 07/12	(ii)	С	C	0	С	0	(
THERESA C WESTCOTT	(i)	213,228.	d	29,989.	25,000.	28,721.	296 , 938.	
5 VP FINANCE & ADMIN. & TREAS.	(ii)	C	C	0	C	0	(
LAWRENCE CACCIATORE	(i)	175,580.	d	9,214.	18,500.	12,632.	215 , 926.	
6 SECRETARY TO BOARD OF TRUSTEES	(ii)	C	C	0	C	0	(
DEREK WITTNER	(i)	243,500.	q	21,500.	25,000.		290,922.	
7 VP OF DEVELOPMENT	(ii)	C	0	0	C	0	() (
JAMEEL AHMAD	(i)	146,467.	d	27,611.	15,198.	28,675.	217 , 951.	
8 PROFESSOR CIVIL ENGINEERING	(ii)	C	0	0	C	0	() (
JAMSHED BHARUCHA	(i)	478,171.	q	37,080.	25,000.	119 , 158.	659 , 409.	
9 PRESIDENT	(ii)	С	0	0	C	0	(
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							L
13	(ii)							
	(i)							
14	(ii)							
	(i)							
_15	(ii)						·	
	(i)							
16	(ii)	·					·	

Schedule J (Form 990) 2012

JSA 2E1291 1.000 Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

THE PRESIDENT IS PROVIDED WITH HOUSING AND CLEANING SERVICES AS A

CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE COLLEGE. HOUSING WAS

```
INCLUDED AS NONTAXABLE COMPENSATION ON SCHEDULE J, PART II, COLUMN (D).
```

THE PRESIDENT'S COMPENSATION ON SCHEDULE J IS FOR CALENDAR YEAR 2012 AND

REPRESENTS HIS FIRST FULL YEAR OF EMPLOYMENT AT COOPER UNION.

Page 3

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Complete if the organizations answered	l "Yes" on Form
990, Part IV, lines 29 or 30).
► Attach to Form 990.	

2012 **Open To Public** Inspection

Name of the organization	THE COOPER UNION FOR THE ADVANCEMENT OF	Employer identification number
SCIENCE & ART		13-5562985

SCIENCE & ART

Department of the Treasury Internal Revenue Service

Par	Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(o Method of o noncash contri		
1	Art - Works of art						
2	Art - Historical treasures						-
3	Art - Fractional interests						-
4	Books and publications						
5	Clothing and household						-
	goods						
6	Cars and other vehicles						
7	Boats and planes						-
8	Intellectual property						-
9	Securities - Publicly traded		56.	1,473,548.	FAIR MARKE	T VALU	ſΕ
10	Securities - Closely held stock						-
11	Securities - Partnership, LLC,						
	or trust interests						
12	Securities - Miscellaneous						-
13	Qualified conservation						-
	contribution - Historic						
	structures						
14	Qualified conservation						-
	contribution - Other						
15	Real estate - Residential						-
16	Real estate - Commercial						-
17	Real estate - Other						-
18	Collectibles						-
19	Food inventory						-
20	Drugs and medical supplies						-
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ►(_ATCH 1)		1.	269,000.			
26	Other ►()						
27	Other ►()						
28	Other ►()						
29	Number of Forms 8283 received	by the orga	anization during the tax ve	ar for contributions for			
	which the organization completed I	, ,	o ,		29		
	č 1					Yes	No
30 a	During the year, did the organizat						
	it must hold for at least three yea						
	used for exempt purposes for the e	ntire holding	period?			30a	Х
b	If "Yes," describe the arrangement i	n Part II.					
31	Does the organization have a	gift accept	tance policy that require	s the review of any r	on-standard		
	contributions?					31 X	
32 a	Does the organization hire or use	e third part	ies or related organization	s to solicit, process, or s	ell noncash		
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization did not report ar	n amount in	column (c) for a type of pro	perty for which column (a) is checked,		
	describe in Part II.						
For P	aperwork Reduction Act Notice, see th	ne Instruction	s for Form 990.		Schedule M	(Form 990) (2012)

Page 2

Schedule M (Form 990) (2012)

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
L. LEVENSTEIN PHOTOGRA	PHS X	1.	269,000.	FAIR MARKET VALUE
TOTALS	=	1.	269,000.	

Schedule M (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2 **Open to Public** Inspection

Name of the organization SCIENCE & ART THE COOPER UNION FOR THE ADVANCEMENT OF

13-5562985

ORGANIZATION'S MISSION

990, PART III, LINE 1:

IN SEPTEMBER 2000, THE BOARD OF TRUSTEES OF THE COOPER UNION APPROVED THE FOLLOWING TWO-PARAGRAPH MISSION STATEMENT:

THROUGH OUTSTANDING ACADEMIC PROGRAMS IN ARCHITECTURE, ART AND ENGINEERING, AND A FACULTY OF HUMANITIES AND SOCIAL SCIENCES, THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND ART PREPARES TALENTED STUDENTS TO MAKE ENLIGHTENED CONTRIBUTIONS TO SOCIETY.

THE COLLEGE ADMITS UNDERGRADUATES SOLELY ON MERIT AND AWARDS FULL SCHOLARSHIPS TO ALL ENROLLED STUDENTS. THE INSTITUTION PROVIDES CLOSE CONTACT WITH A DISTINGUISHED, CREATIVE FACULTY AND FOSTERS RIGOROUS, HUMANISTIC LEARNING THAT IS ENHANCED BY THE PROCESS OF DESIGN AND AUGMENTED BY THE URBAN SETTING. FOUNDED IN 1859 BY PETER COOPER, INDUSTRIALIST AND PHILANTHROPIST, THE COOPER UNION OFFERS PUBLIC PROGRAMS FOR THE CIVIC, CULTURAL AND PRACTICABLE ENRICHMENT OF NEW YORK CITY.

IN APRIL 2013, THE BOARD OF TRUSTEES VOTED TO REDUCE THE FULL-TUITION SCHOLARSHIP TO 50% FOR ALL UNDERGRADUATE STUDENTS BEGINNING WITH THE CLASS ENTERING IN THE FALL OF 2014.

IN JANUARY 2014, THE BOARD OF TRUSTEES REAFFIRMED THE TUITION PLANS APPROVED IN APRIL 2013 AND ANNOUNCED PLANS TO CONSTITUTE A GROUP OF

Schedule O (Form 990 or 990-EZ) 2012					
Name of the organization	THE COOPER UNION FOR THE ADVANCEMENT OF	Employer identification number			
SCIENCE & ART		13-5562985			

TRUSTEES TO WORK WITH FACULTY, STUDENTS, ADMINISTRATION, STAFF, ALUMNI, AND FRIENDS TO CLARIFY THE MISSION FOR THE 21ST CENTURY AND TO DEVELOP A STRATEGIC PLAN FOR IMPLEMENTING THE MISSION.

990, PART III, LINE 4A:

FALL 2012 (ACADEMIC YEAR 2012-2013)

UNDERGRADUATE STUDENTS - 880 (848 FULL-TIME, 7 PART-TIME AND 25

VISITING).

GRADUATE STUDENTS - 59

UNDERGRADUATE STUDENTS (BY HOME ADDRESS) - NEW YORK STATE: 61 PERCENT, NEW JERSEY: 11 PERCENT, OTHER: 28 PERCENT.

990, PART III, LINE 4C:

OUTREACH CONTINUES TO BE A FULL SCHOLARSHIP, YEAR-ROUND PROGRAM FOR NEW YORK CITY AREA HIGH SCHOOL STUDENTS, GRADES 10-12, AND IS IDEAL PREPARATION FOR STUDENTS INTERESTED IN PURSUING A DEGREE IN ART. THE SATURDAY PROGRAM, OUTREACH PROGRAM, CONTINUING EDUCATION AND PUBLIC AFFAIRS EXPENSES INCLUDE ALLOCATED FACILITIES, INTEREST, AND DEPRECIATION EXPENSES.

990 PART III LINE 4D

STATEMENT OF PROGRAM SERVICE EXPENSES, PART III OF THE 990, NOW REFLECTS THE FUNCTIONAL EXPENSE PRESENTATION FORMAT FOR PROGRAM SERVICES AS IN THE AUDITED FINANCIAL STATEMENTS. EARLIER FORM 990 ALLOCATED EXPENSES AMONG THE ACADEMIC PROGRAMS OF ARCHITECTURE, ART AND ENGINEERING. THIS METHOD HAD EXCLUDED FROM THE SCHOOL TOTALS INDIRECT AND OTHER ALLOCATED ACADEMIC

Schedule O (Form 990 or 990-EZ) 2012						Page 2			
Name of the organization	THE CO	OOPER	UNION	FOR	THE	ADVANCEMENT	OF	Employer identification number	
SCIENCE & ART								13-5562985	

EXPENSES. THE NEW FORMAT WAS MADE TO ALIGN WITH OTHER EXTERNAL REPORTING. THE FOLLOWING PRESENTATION PRESENTS THE NUMBERS FROM PART III OF THIS FORM 990 IN THE PRIOR YEAR FORMAT TO ALLOW FOR AN EASIER YEAR OVER YEAR COMPARISON.

	EXPENSES	GRANTS	REVENUE
LINE 4A: ENGINEERING	\$ 8,678,590	\$ 10,284	\$1,504,746
LINE 4B: ART	\$ 5,821,696	\$ 40,853	\$ 832,796
LINE 4C: ARCHITECTURE	\$ 3,596,837	\$ 23 , 750	\$ 461,495
LINE 4D: OTHER	\$34,628,286	\$709 , 922	\$3,004,656
TOTAL	\$52,725,409		

990 PART VI, SECTION A, LINE 2 MARTIN TRUST AND GEORGIANA SLADE-MELLGARD: BUSINESS RELATIONSHIP

990 PART VI, SECTION A, LINE 4

AN AMENDMENT WAS MADE TO THE BYLAWS GIVING THE PRESIDENT OF THE ORGANIZATION VOTING RIGHTS ON THE BOARD OF TRUSTEES. THE BYLAWS STATES: "THE PRESIDENT OF THE CORPORATION SHALL SERVE AS A VOTING MEMBER ON THE BOARD OF TRUSTEES FOR SUCH TIME AS HE OR SHE SHALL CONTINUE TO SERVE AS PRESIDENT. AMENDED SEPTEMBER 19, 2012, BOARD MEETING, ARTICLE 1, BOARD OF TRUSTEES, SECTION 1.04, ELECTION OF TRUSTEES."

990 PART VI, SECTION B, LINE 11B THE FORM 990 IS REVIEWED BY EXTERNAL AUDITORS (KPMG), THEN REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD AND PROVIDED TO ALL VOTING MEMBERS, AS A

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WHOLE, BEFORE IT IS FILED.

990 PART VI, SECTION B, LINE 12C:

THE COOPER UNION CONDUCTS AN ANNUAL REVIEW OF THE CONFLICT OF INTEREST POLICY AND PROCEDURES AS FOLLOWS: THE COOPER UNION PROHIBITS MEMBERS OF THE BOARD OF TRUSTEES, OFFICERS AND STAFF FROM PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND DECISION-MAKING REGARDING TRANSACTIONS THAT MAY PRESENT A CONFLICT OF INTEREST UNDER THE CONFLICT OF INTEREST POLICY. AN ANNUAL POLICY QUESTIONNAIRE IS SENT TO ALL TRUSTEES, EXECUTIVE STAFF AND CERTAIN OTHER EMPLOYEES. RETURNED FORMS ARE REVIEWED BY THE CORPORATE SECRETARY. DISCLOSED CONFLICTS ARE SUBMITTED TO THE AUDIT COMMITTEE FOR REVIEW AND ADJUDICATION. THE COOPER UNION DOCUMENTS, THROUGH COMMITTEE MINUTES, ANY DECISIONS RELATED TO TRANSACTIONS INVOLVING AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST. THE SECRETARY TO THE BOARD OF TRUSTEES IS RESPONSIBLE FOR MAINTAINING A LIST OF CONFLICTS DISCLOSED BY TRUSTEES, OFFICERS, AND STAFF ANNUALLY. COOPER UNION CONDUCTS A PERIODIC REVIEW OF TRANSACTIONS INVOLVING SIGNIFICANT EXPENDITURES TO ENSURE ANY COMPENSATION PAID CONTINUES TO BE REASONABLE.

990 PART VI, SECTION B, LINE 15: THE COMPENSATION COMMITTEE OF THE BOARD REVIEWS AND APPROVES PERIODICALLY, BUT NO LESS FREQUENTLY THAN ANNUALLY, THE INSTITUTIONAL GOALS AND OBJECTIVES RELEVANT TO COMPENSATION OF THE PRESIDENT AND OTHER OFFICERS AND DEANS. THE COMPENSATION COMMITTEE THEN RECOMMENDS THE

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Schedule O (Form 990 or 990-EZ) 2012					
Name of the organization	THE COOPER	. UNION FOR THE ADVANCEMEN	T OF	Employer identification number	
SCIENCE & ART				13-5562985	

COMPENSATION LEVEL OF THE PRESIDENT BASED ON THE VALUE OF SIMILAR COMPENSATION TO PERSONS HOLDING COMPARABLE POSITIONS AT COMPARABLE INSTITUTIONS AND COMPENSATION LEVELS IN PRIOR YEARS FOR APPROVAL BY THE FULL BOARD. IT ALSO APPROVES THE COMPENSATION OF OTHER OFFICERS AND DEANS IN LIGHT OF THOSE GOALS AND OBJECTIVES. THE ORGANIZATION MAINTAINS CONTEMPORANEOUS WRITTEN RECORDS REGARDING THE COMPENSATION DETERMINATION PROCESS. NO INDIVIDUALS WHO HAVE A CONFLICT OF INTEREST MAY BE INVOLVED IN THE COMPENSATION REVIEW, DISCUSSIONS AND DECISIONS.

990 PART VI, SECTION C, LINE 19: THE COOPER UNION WILL MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.

990 PART VIII, LINE 1F THIS AMOUNT INCLUDES TEMPORARILY AND PERMANENTLY RESTRICTED CONTRIBUTIONS RECEIVED DURING THE FISCAL YEAR.

990 PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES: AMOUNT NOT YET RECOGNIZED AS A COMPONENT OF NET PERIODIC BENEFIT COST 4,184,289 _____ OTHER CHANGES IN NET ASSETS OR FUND BALANCES 4,184,289

Schedule O (Form 990 or 990-EZ) 2012

Schedule O (Form 990 or 990-EZ) 2012				
Name of the organization	THE COOPER UNION FOR THE ADVANCEMENT OF	Employer identification number		
SCIENCE & ART		13-5562985		

SCHEDULE B, PART II

CONTRIBUTOR #5:

DESCRIPTION OF

DATE

NONCASH PROPERTY GIVEN	FMV (OR ESTIMATE)	RECEIVED
TWO GIFTS OF 100 SHARES OF JPM CHASE	\$ 10,826	5/22/2013
TWO GIFTS OF 7441 SHARES OF EXXON	\$1,378,966	5/22/2013
TWO GIFTS OF 185 SHARES OF 3M	\$ 41,229	5/22/2013
TWO GIFTS OF 120 SHARES OF COKE	\$ 10,188	5/22/2013
TWO GIFTS OF 120 SHARES OF HOME DEPOT	\$ 19,289	5/22/2013
TWO GIFTS OF 75 SHARES OF JOHN DEERE	\$ 13,050	5/22/2013
TOTAL	\$1,473,548	

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

ATTACHMENT 1

CAYMAN ISLANDS

VIRGIN ISLANDS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
CDG GROUP, LLC 645 FIFTH AVE NEW YORK, NY 10022	CONSULTANT	1,204,486
FJC SECURITY SERVICES, INC 275 JERICHO TURNPIKE	SECURITY	1,054,297.

Name of the organization THE COOPER UNION FOR THE	E ADVANCEMENT OF Employer i	dentification number
SCIENCE & ART	13-	5562985
	ATTACHM	ENT 2 (CONT'D)
990, PART VII- COMPENSATION OF THE FIVE	HIGHEST PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
FLORAL PARK, NY 11101		
CLLUCIAN (DATATEL, INC.)	SOFTWARE MAINTENANCE	599,714.
2814 COLLECTIONS CTR DRIVE HICAGO, IL 60639		
ROBERTOS BUILDING MAINTENANCE	MAINTENANCE	526,828.
PO BOX 1210 IEW YORK, NY 10028		
PERFECT BUILDING MAINTENANCE	MAINTENANCE	379,061.
60 LEXINGTON AVE		
EW YORK, NY 10017		

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13-5562985

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990. See separate instructions. 	Open to Public Inspection
Name of the organization	THE COOPER UNION FOR THE ADVANCEMENT OF	Employer identification number
SCIENCE & ART		13-5562985
Part I Identifica	ation of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
_(1)					
_(2)					
_(6)					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr	g) 512(b)(13) rolled tity?
						Yes	No
(1) ASTOR PLACE HOLDING CORPORATION 13-6126686							
C/O COOPER UNION, 30 COOPER SQ NEW YORK, NY 10003	PROPERTY	NY	501(C)(2)	N/A	COOPER UNION	Х	
(2) C.V. STARR RESEARCH FOUNDATION 13-2878769							
C/O COOPER UNION, 30 COOPER SQ NEW YORK, NY 10003	RESEARCH/EDUC	NY	501(C)(3)	11	COOPER UNION	Х	
_(4)							
_(5)							
_(6)							
(7)						 	
_(7)							

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

Schedule R (Form 990) 2012

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Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

	nere related erga			artiferenip daring the	tax your.)							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Dispropalloca	itions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	(j) eral or laging tner?	(k) Percentage ownership
							Yes	No		Yes	No	
<u>(1)</u>												
<u>(2)</u>												
(3)												
<u>(4)</u>												
(5)												
(6)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percen- tage ownership	512(cont	(i) ction (b)(13) trolled tity?
								Yes	No
(1) PLANNED GIVING POOLS (57)	_							in the second	
	ANNUITY		N/A	TRUST	3,604,148.			Х	
(2) CHARITABLE REMAINDER TRUST (14)	_							in the second	
	ANNUITY		N/A	TRUST	2,289,488.			Х	
<u>(3)</u>	-							l	
<u>(4)</u>	-							in the second	
<u>(5)</u>	-							in the second	
<u>(6)</u>	-							l	
								ſ	
<u>(7)</u>								1	
								ľ	

Schedule R (Form 990) 2012

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Schedule R (Form 990) 2012

Note	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	1
	During the tax year, did the organization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?				
I	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Х	
)	Gift, grant, or capital contribution to related organization(s)				1b		
;	Gift, grant, or capital contribution from related organization(s)				1c		
ł	Loans or loan guarantees to or for related organization(s)				1d		
e	Loans or loan guarantees by related organization(s)				1e		
	Dividends from related organization(s)				1f		
1	Sale of assets to related organization(s)				1g		
, 1	Purchase of assets from related organization(s)			• • • • •	1h		T
•	Exchange of assets with related organization(s)				11		
	Lease of facilities, equipment, or other assets to related organization(s)				1j	X	-
					_	23	F
I	Lease of facilities, equipment, or other assets from related organization(s)				1k		
	Performance of services or membership or fundraising solicitations for related organization(s)				11		
n	Performance of services or membership or fundraising solicitations by related organization(s)				1m		
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х	
	Sharing of paid employees with related organization(s)				10	Х	
,							-
b	Reimbursement paid to related organization(s) for expenses				1p		
D					1p		
0 7	Reimbursement paid to related organization(s) for expenses			 	1p 1q		
) 1	Reimbursement paid to related organization(s) for expenses			 	<u>1p</u> 1q 1r		
p q r s	Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	1p 1q 1r 1s	X	
p q r s	Reimbursement paid to related organization(s) for expenses	this line, including cov	ered relationships and transa	· · · · · · · · · · · · · · · · · · ·	1p 1q 1r 1s shold	X	
p q r s	Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	this line, including cov (b) Transaction	· · · · · · · · · · · · · · · · · · ·	action thre	1p 1q 1r 1s shold (d) I of det	X S.	
	Reimbursement paid to related organization(s) for expenses	this line, including cov	ered relationships and transa	action thre	1p 1q 1r 1s shold (d)	X S.	
D 7	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction	ered relationships and transa	action thre	1p 1q 1r 1s shold (d) I of det	X S.	
)	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction type (a-s) A	ered relationships and transa (c) Amount involved 305,298.	action thre Method amo CASH	1p 1q 1r 1s shold (d) I of det	X S.	
)	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction type (a-s)	ered relationships and transa (c) Amount involved	action thre Method amo	1p 1q 1r 1s shold (d) I of det	X S.	
)	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction type (a-s) A	ered relationships and transa (c) Amount involved 305,298.	action thre Method amo CASH	1p 1q 1r 1s shold (d) I of det	X S.	
p q r s))	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction type (a-s) A	ered relationships and transa (c) Amount involved 305,298.	action thre Method amo CASH	1p 1q 1r 1s shold (d) I of det	X S.	
p q r s)) 2)	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction type (a-s) A	ered relationships and transa (c) Amount involved 305,298.	action thre Method amo CASH	1p 1q 1r 1s shold (d) I of det	X S.	
p q r s	Reimbursement paid to related organization(s) for expenses	this line, including cov (b) Transaction type (a-s) A	ered relationships and transa (c) Amount involved 305,298.	action thre Method amo CASH	1p 1q 1r 1s shold (d) I of det	X S.	

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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501(e) partners tion c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) portionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen man	(j) eral or aging tner?	(k) Percentage ownership
			section 512-514)	Yes	No			Yes	No	(Yes	No	
<u>_(1)</u>													
_(2)													
(3)													
_(4)													
_(5)													
_ <u>(6)</u>													
<u>_(7)</u>													
_ <u>(8)</u>													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Schedule R (Form 990) 2012

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Schedule R (Form 990) 2012	
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Part VII	Supplemental Information
	Complete this part to provide additional information for responses to questions on Schedule R (see instructions).