	rtment	90 of the Trea	asury	Under sectio ►I	n 501(c), 527 Do not enter	7, or 4947(a)(1 Social Secur	1) of the In ity number	ternal Revenu s on this form	ue Code (e: as it may t	xcept p be made	orivate foundat e public.	tions)	OMB No. 1545-0047 2018 Open to Public Inspection
A F	or th			dar year, or tax				/01 ,2018, a		g		06	/30, 20 19
_			C Name	of organization TH	E COOPER	UNION F	OR THE	ADVANCEM	ENT OF		D Employer ide	entific	cation number
B Cł	neck if ap	oplicable:	SCI	ENCE & ART									
	Addre		Doing	Business As							13-5562	2985	5
	1 1	change	•	er and street (or P.0	D. box if mail is	not delivered to	street addres	s) R	oom/suite		E Telephone n	umbei	r
	1	return	30	COOPER SQUA	ARE				2ND FL		(212) 35	3 – 4	140
	Termi	- F		r town, state or prov		and ZIP or foreig	n postal code	l			. ,		
	Amen	ded	NEW	YORK, NY 1	L0003-71	20					G Gross receip	ts \$	160,912,378.
	returr Applic	cation		and address of prin			SPARKS.	PRESIDE	NT		H(a) Is this a grou		
	_ pendi	ng		AST 7TH STE							subordinates H(b) Are all subord	?	
	Tay-ey	empt sta		X 501(c)(3)	501(c) (rt no.)	4947(a)(1) or	527				t. (see instructions)
		· ·		OOPER.EDU	501(0) (11 110.)	4947 (a)(1) 01	527		H(c) Group exem		
-		of organi		X Corporation	Trust	Association	Other 🕨		I Voor of		· · · · ·		of legal domicile: NY
	art I	<u> </u>	nmary		TTUSI	ASSOCIATION	Other	·		Iomatio		State	
Ге				e the organization	-111							אזרו	
	1	Briefly	describ	e the organization	n's mission o אד אד נ	T MOST SIGNIFICA	ant activities	LINE COO		LON F			
nce				ING, ARCHIT				THAT OFFE					
erna	~			<u></u>									
оvе					-			s or disposed				I I	23.
S G				ing members of t								3	23.
Activities & Governance				ependent voting i								4	
viti				of individuals emp			8 (Part V, li	ne 2a)				5	1,059.
\cti				of volunteers (esti									100.
4				d business revenu								7a	8,215.
	b	Net un	related	business taxable	income from	Form 990-T, li	ne 34 🔒 🔒		<u></u>			7b	0.
											Prior Year	_	Current Year
er			tributions and grants (Part VIII, line 1h)							12,148,197.		21,300,150.	
ent	9	Progra	ogram service revenue (Part VIII, line 2g) PUBLIC INSPECTION PUBLIC INSPECTION						44,218,513.			45,254,459.	
Revenue				come (Part VIII, co			Ŋ]	5	51,272,64	63,582,780.	
-	11										2,177,84		2,619,536.
	12	Total r	evenue	- add lines 8 thro	ugh 11 (must	t equal Part VII	I, column (A	A), line 12) 🔒			9,817,19		132,756,925.
	13		ts and similar amounts paid (Part IX, column (A), lines 1-3)						2	29,760,18		29,722,825.	
	14	Benefi	ts paid	o or for members	(Part IX, colu	ımn (A), line 4)						0.	0.
es	15									4	40,671,084.		38,619,852.
Expenses	16a	Profes	sional f	r compensation, e undraising fees (Pa ng expenses (Par	art IX, columr	n (A), line 11e)					196,15	51.	108,935.
xb	b	Total f	undrais	ng expenses (Par	t IX, column (D), line 25) 🕨	3,	109,001.					
											36,401,91		39,183,650.
				s. Add lines 13-1						10	029,34		107,635,262.
	19	Reven	ue less	expenses. Subtra	ct line 18 fron	n line 12 🚬					2,787,85		25,121,663.
Net Assets or Fund Balances											ing of Current Y		End of Year
sset alar	20			Part X, line 16)							16,137,84		1,101,678,183.
t As Nd B	21	Total li	abilities	(Part X, line 26)							73,830,70		366,146,772.
P ^r ur	22			fund balances. S	ubtract line 21	I from line 20.		<u></u>		67	72,307,13	7.	735,531,411.
Ра	rt II	Sig	nature	Block									
Unc	ler per	halties of	f perjury,	I declare that I have Declaration of prep	e examined th	is return, includ	ling accompa	anying schedules	s and statem	ents, an	d to the best of	my l	knowledge and belief, it is
tiue	, 00110		Joinploto										
c :~											07/1	5/2	020
Sig Her			-	e of officer							Date		
iner	e	🕨 -	JOHN					VP, FIN	IANCE &	ADM			
				rint name and title									
Dain		Print/T	Type pre	oarer's name		Preparer's sign			Date	10000	Check		PTIN
Paid Pror	barer	DANI	IEL I	ROMANO					07/13	/2020	,		00504182
	oarer Only	Firm's	name	▶ GRANT TH	ORNTON L	ιLP				F			6055558
		Firm's	address	▶ 757 THIRD AV	ENUE, 4TH F	LOOR NEW YOR	K, NY 1001	7-2013		F	Phone no.	212	-599-0100
May	the I	RS disc	cuss this	s return with the p	preparer show	n above? (see	instructions	5)		<u> </u>			. X Yes No
For	Pape	rwork F	Reducti	on Act Notice, se	e the separat	te instructions							Form 990 (2018)

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.
 Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing *(e-file).* You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request 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/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (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			
T	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or			
print File by the due date for	THE COOPER UNION FOR THE ADVANCEMENT OF				
	SCIENCE & ART	13-5562985			
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)			
filing your	30 COOPER SQUARE 2ND FL				
return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
instructions.	NEW YORK, NY 10003-7120				
	•				

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	rm 990-BL 02 Form 1041-A 08								
Form 4720 (individual)	03	Form 4720 (other than individual)		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 JOHN RUTH 30 COOPER SQUAR	Е, 7тн н	FLOOR NEW YORK NY 10003-7120							
Telephone No. ► 212 353-4247 • If the organization does not have an office or place of • If this is for a Group Return, enter the organization's fo for the whole group, check this box ►	business in ur digit Gro f it is for pa	up Exemption Number (GEN)	If ti	his is					
a list with the names and EINs of all members the extens 1 I request an automatic 6-month extension of time u									
 for the organization named above. The extension is calendar year 20 or X tax year beginning 07/0 2 If the tax year entered in line 1 is for less than 12 m Change in accounting period 	for the org 01 , 20 18 nonths, check	yanization's return for: 3, and ending06/30_, 2 9k reason: Initial return Final return	20 <u>19</u> .						
3a If this application is for Forms 990-BL, 990-PF, 9	90-T, 4720								
nonrefundable credits. See instructions.			3a \$	0.					
b If this application is for Forms 990-PF, 990-T,		-							
estimated tax payments made. Include any prior yea			3b \$	0.					
c Balance due. Subtract line 3b from line 3a. Include	• • •	ent with this form, if required, by using EFTPS							
(Electronic Federal Tax Payment System). See instru			3c \$	0.					
Caution: If you are going to make an electronic funds withdrawa	I (direct deb	t) with this Form 8868, see Form 8453-EO and Form	8879-EO f	or payment					
instructions.									
For Privacy Act and Paperwork Reduction Act Notice, see instr	ructions.		Form 8868	B (Rev. 1-2019)					

THE	COOPER	UNION	FOR	THE	ADVANCEMENT	OF

For	rm 990 (2018)	Page 2
Pa		
		X
1		
	SEE SCHEDULE O	
Earting Statement of Program Service Accomplishments Check & Schedulo contains a response or note to any line in this Part III		
2		
		Yes X No
3		
		Yes X No
4		
		cations to others,
	the total expenses, and revenue, if any, for each program service reported.	
4a		47,579.)
	0)	
		06,880.)
	APARTMENT-STYLE HOUSING TO 170 STUDENTS. THE FACILITY IS STAFFED	
	· · · · · · · · · · · · · · · · · · ·	
	AND PERSPECTIVES, AND HELPING STUDENTS TRANSITION TO LIFE IN NEW	
	YORK CITY AND AT THE COOPER UNION.	
4c	; (Code:) (Expenses \$including grants of \$) (Revenue \$))
4d	I Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 92,883,140.	
JSA		Form 990 (2018)
8E1	1020 1.000 4492NM 700J 7/14/2020 8:30:38 AM V 18-8.6F 0194954-00003	PAGE 4

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,	-		
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
c		5		
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			v
_	"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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? 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	Х	
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	Х	
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
		TIE	21	
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	A	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
_	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		37	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		Х
20 a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
~ '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
JSA		- 1		L

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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			
	employees? If "Yes," complete Schedule J	23	Х	
24 -	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	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			37
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I.	25b		х
		250		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? 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
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
b		0.01		х
	Schedule L, Part IV	28b		
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	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
•-		32		х
22	complete Schedule N, Part II	52		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
~ ·	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	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	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? 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			
5.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
20		- 57		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		Х	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	21	
Part				
	Check if Schedule O contains a response or note to any line in this Part V.			┉────
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0.			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
2	reportable gaming (gambling) winnings to prize winners?	1c	Х	
				(2018)
JSA				(2010)

Form	990 (2018)		F	Page 5				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
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 1,059							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,							
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country:							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
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).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods							
	and services provided to the payor?	7a	X					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		v				
	required to file Form 8282?	7c		X				
	If "Yes," indicate the number of Forms 8282 filed during the year	7.		Х				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h						
_	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. Did a donor advised fund maintained by the	8						
9	sponsoring organization have excess business holdings at any time during the year?	•						
	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
	Initiation fees and capital contributions included on Part VIII, line 12							
	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							
b	Gross income from other sources (Do not net amounts due or paid to other sources							
	against amounts due or received from them.)							
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	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							
	Enter the amount of reserves on hand			37				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		v				
	excess parachute payment(s) during the year?	15		X				
4.6	If "Yes," see instructions and file Form 4720, Schedule N.	16	Х					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					

Form	۵۵۸	(201)	ع۱
Form	990	(201	0)

THE COOPER UNION FOR THE ADVANCEMENT OF

Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "I	VO'
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruction	
	Check if Schedule O contains a response or note to any line in this Part VI	Χ

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	<i>'</i>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		x
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		A
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	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b	х	
	rise to conflicts?	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	х	
40	describe in Schedule O how this was done	13	X	
13	Did the organization have a written whistleblower policy?	14	Х	
14 15	Did the process for determining compensation of the following persons include a review and approval by			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a	Х	
a b	Other officers or key employees of the organization	15b		X
D	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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T	(Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
			P -	

19	Describe in Schedule O whe	ether (and if so, h	now) the o	rganization made	its governing	documents,	conflict of	interest	policy,	and
	financial statements available	le to the public du	iring the ta	x year.						

20 State the name, address, and telephone number of the person who possesses the organization's books and records ► JOHN RUTH 30 COOPER SQUARE, 2ND FLOOR NEW YORK, NY 10003-7120 212-353-4247

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organization's tax year.

Page /

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

 Check if Schedule O contains a response or note to any line in this Part VII
 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

• 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) (B) Position (C) (E) (E) (F) Name and Tile Average hours per veck (iffar and all cector/fusce) (do not notek more than our) (vice and all cector/fusce) Reportable compensation from related Reportable compensation from related (1)/OSEPH DOBRONY1 1.00 Image: series is both on organizations in organizations Image: series is both on organizations Image: series is both on organizations Image: series is both on organizations (1)/OSEPH DOBRONY1 1.00 X Image: series is both on organizations Image: series is both on organizations Image: series is both on organizations (I)/OSEPH DOBRONY1 1.00 X Image: series is both on organizations Image: series is both on organizations Image: series is both on organizations (I)/OSEPH DOBRONY1 1.00 X Image: series is both on organization Image: series is both on organizations Image: series is both on organizations (I)/OSEPH DOBRONY1 1.00 X X Image: series is both on organization Image: series is both on organization (I)/OSEPH DOBRONY1 1.00 X X Image: series is both on organization Image: seris is both on organization						C)					
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	rt VII Section A. Officers, Directors, Tru		усп	pio				ngi			
	(A) Name and title	(B) Average hours per	(do n	ot ch	Pos	C) ition more	e than o	ne	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)					is or/truste or/truste employee		from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
			'ustee	l trustee		ee	npensated				
5)	ANNE CHAO MEMBER - BOARD OF TRUSTEES	1.00 0.	х						0.	0.	
6)	WANDA FELTON MEMBER - BOARD OF TRUSTEES	1.00 0.	х						0.	0.	
.7)	LYNN LANDER MEMBER - BOARD OF TRUSTEES	1.00	х						0.	0.	
8)	STEPHEN GERARD VICE CHAIR - BOARD OF TRUSTEES	1.00	x		x				0.	0.	
9)	PAUL NIKULIN MEMBER - BOARD OF TRUSTEES	1.00	x		-				0.	0.	
0)	CRISTINA AGUIRRE-ROSS FR 12/18 MEMBER - BOARD OF TRUSTEES	1.00	x						0.	0.	
1)	PAMELA FLAHERTY FROM 6/19 MEMBER - BOARD OF TRUSTEES	1.00 0.	x						0.	0.	
2)	AFTAB HUSSAIN FROM 6/19 MEMBER - BOARD OF TRUSTEES	1.00	x						0.	0.	
3)	MAHMOUD KHAIR-ELDIN FROM 6/19 MEMBER - BOARD OF TRUSTEES	1.00	x						0.	0.	
4)	DWIGHT MCBRIDE FROM 12/18 MEMBER - BOARD OF TRUSTEES	1.00	x						0.	0.	
5)	MARGARET MATZ FROM 6/19 MEMBER - BOARD OF TRUSTEES	1.00	x						0.	0.	
1b	Sub-total	<u> </u>			I	I		►	0.	0.	
С	Total from continuation sheets to Part VII, So Total (add lines 1b and 1c)					•••	• • • • • •		2,798,302. 2,798,302.	0.	598,38 598,38
	Total number of individuals (including but not l reportable compensation from the organization	limited to tl		iste				o re		\$100,000 of	
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										Yes I 3 X
4	For any individual listed on line 1a, is the sorganization and related organizations grain individual	eater than	\$15	0,0	00?	lf	"Yes	,"			4 X
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue col	mpen	sati	on f	from	n any	un			5
Se 1	ction B. Independent Contractors 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	rvices ((C) Compensation
ΑΊ	TACHMENT 1										

	(A) Name and title	Name and title Average hours per (d week (list any hours for off					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
		related 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)	from the organization and related organizations
	LAURA SPARKS PRESIDENT	35.00 0.			х				499,812.	0.	254,22
	DANIELLE C. DAUGHTRY GOVERNANCE/EXT AFFAIRS OFFICER	35.00 0.			x				180,917.	0.	19,92
	JOHN RUTH VP-FIN/ADMIN, TREASURER	35.00			x				267,723.	0.	57,12
	MITCHELL LIPTON TILL 9/18 VICE PRESIDENT OF ENROLLMENT	35.00				x			286,353.	0.	28,36
	NADER TEHRANI DEAN/PROF. OF ARCHITECTURE	35.00					х		302,029.	0.	39,99
	RICHARD STOCK DEAN, SCHOOL OF ENGINEERING	35.00					х		228,002.	0.	59,05
	ROBERT HOPKINS (UNTIL 9/18) CHIEF TECHNOLOGY OFFICER	35.00					х		300,414.	0.	34,59
	NATALIE BROOKS CHIEF TALENT LEADER	35.00					x		229,933.	0.	
	PETER BUCKLEY DEAN/PROF. OF HUMANITIES KEITH STOKELD 8/17-12/17	35.00 0. 35.00					Х		214,155.	0.	56,85
	INT. DIR. FIN/ADMIN, TREASURER STEPHEN BAKER	0.						x	160,059.	0.	47,93
	VP OF STUDENT AFFAIRS Sub-total	0.						X	128,905.	0.	32
c d	Total from continuation sheets to Part VII, Se Total (add lines 1b and 1c) Total number of individuals (including but not l reportable compensation from the organization	imited to t		iste			e) who	> re	ceived more than	\$100,000 of	
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										Yes N 3 X
4	For any individual listed on line 1a, is the sorganization and related organizations grain individual.	eater than	\$15	0,0	00?	If	"Yes	," (complete Schedu	le J for such	4 X
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye ction B. Independent Contractors	accrue co	mpen	satio	on f	from	n any	uni	related organization	on or individual	5
1	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 C	(C) Compensation

Statution Image: Statution	Par	t VII		onso or noto to an	v line in this Part VII	I		
B Ideal Add mess term 1 Database term 1 <th></th> <th></th> <th></th> <th></th> <th>(A)</th> <th>(B) Related or exempt function</th> <th>(C) Unrelated business</th> <th>Revenue excluded from tax under sections</th>					(A)	(B) Related or exempt function	(C) Unrelated business	Revenue excluded from tax under sections
B Ideal Add mess term 1 Database term 1 <td>ontributions, Gifts, Grants nd Other Similar Amounts</td> <td>b c d e f</td> <td>Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f</td> <td>166,678.</td> <td></td> <td></td> <td></td> <td></td>	ontributions, Gifts, Grants nd Other Similar Amounts	b c d e f	Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f	166,678.				
3 Investment income form 60,408,602. 8,215. 60,400,38 4 Income from investment of tax-exempt bond proceeds 0. 0. 0. 0. 5 Royatties 0. 0. 0. 0. 0. 6a Gross rents 0. 0. 0. 0. 0. 6a Gross rents 0. 1,553,457. 0. 0. 0. 6 Gross rents 0. 1,553,457. 0. 0. 0. 0. 7a Gross amount from sales of assets other than inventory 11,320,402. 0.					21,300,150.			
3 Investment income form 60,408,602. 8,215. 60,400,38 4 Income from investment of tax-exempt bond proceeds 0. 0. 0. 0. 5 Royatties 0. 0. 0. 0. 0. 6a Gross rents 0. 0. 0. 0. 0. 6a Gross rents 0. 1,553,457. 0. 0. 0. 6 Gross rents 0. 1,553,457. 0. 0. 0. 0. 7a Gross amount from sales of assets other than inventory 11,320,402. 0.	rvice Revenue	b		611600				
3 Investment income (including dividends, interest, and other similar amounts)	Program Se	e f			45,254,459.			
Ga Gross rents 1, 553, 457. b Less: rental expenses 1, 553, 457. c Rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 1, 553, 457. d Net rental income of (loss) 31, 320, 402. b Less: cost or other basis and sales expenses 28, 146, 224. a Gross income from fundraising events (not including \$ 6,000. 12,016. of contributions reported on line 1c). a 9, 229. See Part IV, line 19 2,787. g Gross income from gaming activities.		3	Investment income (including divid and other similar amounts)	ends, interest, ►			8,215.	60,400,387.
e Net rental income of (loss) 1.553.457. 1.553.457. 7a Gross amount from sales of assets other than inventory 31.320.402. 1.553.457. b Less: cost or other basis and sales expenses		6a	(i) Real Gross rents	(ii) Personal 7.	0.			
and sales expenses		d	Net rental income or (loss) Gross amount from sales of assets other than inventory 31,320,40	(ii) Other	1,553,457.			1,553,457.
events (not including \$6,000- of contributions reported on line 1c). See Part IV, line 18		c	and sales expenses 28,146,22 Gain or (loss) 3,174,17	8.	3,174,178.			3,174,178.
c Net income or (loss) from fundraising events 2,787. 2,787. 9a Gross income from gaming activities. See Part IV, line 19 0. 0. b Less: direct expenses 0. 0. c Net income or (loss) from gaming activities. 0. 0. 10a Gross sales of inventory, less returns and allowances 0. 0. b Less: cost of goods sold 0. 0. Miscellaneous Revenue Business Code 0. 11a INSURANCE REIMBURSEMENTS 611710 614,260. 614,260 c 0. 0. 0. 0. d All other revenue 11,063,292. 0. 0. 12 Total revenue. See instructions. 132,756,925. 45,254,459. 8,215. 66,194,10	ther Revenue		events (not including \$6,000. of contributions reported on line 1c). See Part IV, line 18	a				
b Less: direct expenses b 0. 0. c Net income or (loss) from gaming activities. 0. 0. 10a Gross sales of inventory, less returns and allowances 0. 0. b Less: cost of goods sold 0. 0. c Net income or (loss) from sales of inventory. 0. 0. b Less: cost of goods sold 0. 0. c 0. 0. 0. Miscellaneous Revenue Business Code 0. 0. 11a INSURANCE REIMBURSEMENTS 611710 614,260. 614,260 c 0. 0. 0. 0. 0. c 0. 0. 0. 0. 0. d All other revenue 0. 0. 0. 0. e Total. Add lines 11a-11d 1. 1.063,292. 0. 0. 0. 12 Total revenue. See instructions. 1.32,756,925. 45,254,459. 8,215. 66,194,10	0	c	Net income or (loss) from fundraising even Gross income from gaming activities.	ts	2,787.			2,787.
10a Gross sales of inventory, less returns and allowances a 0. 0. 0. b Less: cost of goods sold b 0. 0. 0. c Net income or (loss) from sales of inventory			Less: direct expenses	b 0.	0.			
b Less. cost of gloods sold		10a	Gross sales of inventory, less returns and allowances	a <u>0.</u>				
b OTHER REVENUE 611710 449,032. 449,03 c			Net income or (loss) from sales of inventory	►	0.			
e Total. Add lines 11a-11d 1,063,292. 1,063,292. 66,194,10 12 Total revenue. See instructions. 132,756,925. 45,254,459. 8,215. 66,194,10		b c	OTHER REVENUE	611710				614,260. 449,032.
		е	Total. Add lines 11a-11d			45,254,459.		66,194,101.

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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 or note to any line in this Part IX (C) Management and (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 0 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 25,541,472. 25,541,472. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4,181,353 4,181,353. 0 4 Benefits paid to or for members 5 Compensation of current officers, directors, 1,352,348. 169,715. 1,182,633 trustees, and key employees 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 27,087,967. 23,819,573. 1,967,731 1,300,663. 7 Other salaries and wages 8 Pension plan accruals and contributions (include 1,880,217. 1,582,442. 169,285 128,490. section 401(k) and 403(b) employer contributions) 417,772. 4,908,701. 6,187,119 860,646 9 Other employee benefits 2,112,201. 1,779,404. 232,134 100,663. Payroll taxes 10 11 Fees for services (non-employees): 0 a Management 505,803. 5,115. 500,688 **b** Legal 133,919. 133,919 c Accounting 32. 32 d Lobbying 108,935. 108,935. e Professional fundraising services. See Part IV, line 17 2,015,604. 2,015,604 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 6,852. 24,982. 361,070. 329,236 (A) amount, list line 11g expenses on Schedule O.) 179,867. 4,250. 184,117. 12 Advertising and promotion 4,401,208. 2,373,875. 211,662. 1,815,671 13 Office expenses 226,295. 206,851. 19,444. 14 Information technology 0 Royalties 15 7,056,297. 6,324,960. 487,027 244,310. Occupancy 16 464,757. 410,533. 44,044 10,180. 17 Travel Payments of travel or entertainment expenses 18 0 for any federal, state, or local public officials 641,611. 251,292. 118,069 272,250. 19 Conferences, conventions, and meetings 12,912,115. 12,272,005. 512,954. 127,156. Interest 20 0 21 Payments to affiliates 7,955,174. 7,593,123. 220,408 141,643. 22 Depreciation, depletion, and amortization 449,195. 402,454. 25,495 21,246. 23 Insurance 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.) aSTUDENT SERVICES 312,920. 312,920. LIBRARY CONSORTIUM 267,103. 267,103. cLIBRARY BOOKS & PERIODICALS 49,952. 49,952. dMISCELLANEOUS ADMIN 225,448. 1,008,101. 12,929. 1,246,478. e All other expenses 107,635,262 92,883,140. 11,643,121 3,109,001. 25 Total functional expenses. Add lines 1 through 24e 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 following SOP 98-2 (ASC 958-720) 0

JSA

0194954-00003

Form 990	(2018)
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Form	n 990 (2	THE COOPER UNION FOR THE ADVANCEMEN 2018)	1 01	10	5562985 Page 11
-	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this P	art X		
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	30,996,452.	1	36,978,887.
	2	Savings and temporary cash investments	1,425,418.	2	1,805,285.
	3	Pledges and grants receivable, net	1,578,294.	3	6,502,319.
	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0.	5	0.
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
s		organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
Assets	7	Notes and loans receivable, net	2,143,161.	7	2,773,804.
As	8	Inventories for sale or use	0.	8	0.
	9	Prepaid expenses and deferred charges	10,270,850.	9	7,593,646.
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 280, 985, 143.	147 560 004		140 470 407
		Less: accumulated depreciation		10c	142,479,407. 97,960,018.
	11	Investments - publicly traded securities	72,157,931. 780,003,502.	11	805,584,817.
	12	Investments - other securities. See Part IV, line 11		12	0.5,584,817.
	13	Investments - program-related. See Part IV, line 11	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	1,046,137,842.	15 16	1,101,678,183.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	37,994,219.	17	29,286,362.
	17 18	Accounts payable and accrued expenses	0.	18	0.
	10	Grants payable	103,558,064.	19	107,805,368.
	20	Deferred revenue	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
s	22	Loans and other payables to current and former officers, directors,		~ 1	
Liabilities		trustees, key employees, highest compensated employees, and			
lide		disqualified persons. Complete Part II of Schedule L	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	226,989,850.	23	224,133,348.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	5,288,572.	25	4,921,694.
	26	Total liabilities. Add lines 17 through 25.	373,830,705.	26	366,146,772.
ses		Organizations that follow SFAS 117 (ASC 958), check here \blacktriangleright \square and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	-170,206,294.	27	-144,084,539.
Ba	28	Temporarily restricted net assets	756,121,295.	28	787,813,784.
pu	29	Permanently restricted net assets	86,392,136.	29	91,802,166.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
∋ts	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	672,307,137.	33	735,531,411.
	34	Total liabilities and net assets/fund balances	1,046,137,842.	34	1,101,678,183. Form 990 (2018)

THE	COOPER	UNTON	FOR	THE	ADVANCEMENT	OF

Form 99	90 (2018)				Pa	ge 12
Part						
	Check if Schedule O contains a response or note to any line in this Part XI.					Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1			56,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2			35,2	
3	Revenue less expenses. Subtract line 2 from line 1	3			21,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			07,1	
5	Net unrealized gains (losses) on investments	5		28,0	58,9	
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		10,0	43,6	537.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		_		~ ~ ~	
	33, column (B))	10	7.	35,5	31,4	11.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
					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	xplair	n in			
	Schedule O.			_		37
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 com	pilec	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			~	Х	
b	Were the organization's financial statements audited by an independent accountant?			2b	Λ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ed o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis X 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 o		-	2-	х	
	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c	21	
	If the organization changed either its oversight process or selection process during the tax year, e	xplai	n in			
-	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	fort	n in	3a	x	
	the Single Audit Act and OMB Circular A-133?	• •		Ja	- 22	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		tne	3b	х	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	uits.		30	000	

SCHEDULE A

JSA 8E1210 1.000

(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. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 Open to Public

	artment of the Treasury nal Revenue Service			/Form990 for instruction			nformation.	Open to Public Inspection
Nam	e of the organization	THE COOPE	R UNION FOR	THE ADVANCEMENT	C OF		Employer identifi	cation number
SC	IENCE & ART						13-55629	85
Ра	rt I Reason for	r Public Cha	rity Status (All c	organizations must c	omplet	e this pa	art.) See instructions	
		•		is: (For lines 1 through		•	,	
1			•	tion of churches desc				
2				. (Attach Schedule E				
3				rganization described				
4		-	-	conjunction with a nos	spital de	scribed ir	n section 170(b)(1)(A)	(III). Enter the
5	hospital's nam	-		a college or universit		d or one	visited by a dovernme	ntal unit described in
5		•	Complete Part II.)	a conege of universit	y owned		alled by a governme	
6			-	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7		•	•			•		om the general public
			(1)(A)(vi). (Compl	-		Ū		. .
8	A community	trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	Part II.)			
9	An agricultura	I research or	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	l in conjunction with a	land-grant college
	or university o	r a non-land-	grant college of ag	griculture (see instruct	ions). E	nter the i	name, city, and state o	the college or
	university:							
10	receipts from support from acquired by the	activities rela gross investme organizatio	ted to its exempt f nent income and u n after June 30, 1	unctions - subject to nrelated business tax 975. See section 509	certain e able inco (a)(2). (0	exception ome (less Complete		n 331/3 % of its
11		-		usively to test for publi				
12	•	•						arry out the purposes
								ee section 509(a)(3). nes 12e, 12f, and 12g.
~			-				orted organization(s),	-
а	••		•				the directors or truste	
		-		e Part IV, Sections A		ajonty of		
b						n with its	supported organization	on(s), by having
			-				is that control or man	
	organization	(s). You must	complete Part IV	, Sections A and C.				
С	Type III fund	ctionally integ	grated. A supporti	ng organization opera	ted in c	onnectio	n with, and functional	ly integrated with,
		-		is). You must comple				
d		-			-		ection with its suppor	
		-			-		ution requirement and	an attentiveness
				omplete Part IV, Sect				
е		-		ionally integrated sup			nat it is a Type I, Type I ion	і, туре ш
f					porting t	Jiganizat		
g			-	orted organization(s).				
	(i) Name of supported of		(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
					Yes	No	,	
(A)								
(B)								
(C)								
(D)								
(E)								
Tota	al							
For	Paperwork Reduction A	ct Notice. see th	e Instructions for Form	990 or 990-EZ.			Schedule A	(Form 990 or 990-EZ) 2018

0194954-00003

Page 2

Schedule A (Form 990 or 990-EZ) 2018

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
_	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 VI.)						
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 for organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percenta	ige				
14	Public support percentage for 2018 (li	ne 6, column (f) divided by line	11, column (f))		14	%
15	Public support percentage from 2017					15	%
16a	331/3% support test - 2018. If the org	ganization did r	not check the bo	ox on line 13, a	nd line 14 is 33	1/3 % or more, o	check this
	box and stop here. The organization q			-			
b	331/3% support test - 2017. If the org	-					
	this box and stop here. The organization	-		-			
17a	10%-facts-and-circumstances test - 2		-				
	10% or more, and if the organization					-	
	Part VI how the organization meets t			•			· ·
	organization						
b	10%-facts-and-circumstances test - 2		•				
	15 is 10% or more, and if the orga						-
	Explain in Part VI how the organizati				-		
	supported organization						
18	Private foundation. If the organization						
	instructions					<u></u>	<u></u> ► 🖂

Schedule A (Form 990 or 990-EZ) 2018

Page 3

Schedule A (Form 990 or 990-EZ) 2018

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 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.)

	tion A. Public Support						
Calen	ıdar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	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						
	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						
<i>i</i> u	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						
	Add lines 7a and 7b Public support. (Subtract line 7c from						
	•• •						
	line 6.)						
		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	dar year (or fiscal year beginning in) ►	(a) 2014	(6) 2013	(0) 2010	(u) 2011	(6) 2010	(1) 10121
	Amounts from line 6 Gross income from interest, dividends,						
υa	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
		or the organiza	tion's first, secc	nd, third, fourth,	or fifth tax ye	ear as a section	501(c)(3)
14	First five years. If the Form 990 is f	or the organiza					
14	First five years. If the Form 990 is f organization, check this box and stop here	0					
	-			<u></u>			
Sect	organization, check this box and stop here	port Percenta	ge			. 15	
Sect	organization, check this box and stop here tion C. Computation of Public Sup	p ort Percenta , column (f), divid	ge led by line 13, colu	mn (f))			%
Sect	organization, check this box and stop here a tion C. Computation of Public Support Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche	p ort Percenta , column (f), divic edule A, Part III, lir	ge led by line 13, colu ne 15	mn (f))		. 15	%
Sect 15 16 Sect	organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche tion D. Computation of Investmen	port Percenta , column (f), divic edule A, Part III, lin t Income Perc	ge led by line 13, colu ne 15 centage	mn (f))		. 15	%
Sect 15 16 Sect	organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche tion D. Computation of Investmen Investment income percentage for 2018 (line	port Percenta , column (f), divic edule A, Part III, lin t Income Perc ne 10c, column (ge led by line 13, colu ne 15 centage f), divided by line	mn (f)) 13, column (f))	· · · · · · · · · · · · · · · · · · ·	. 15 16 17	%
Sect 15 16 Sect 17 18	organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche tion D. Computation of Investmen Investment income percentage for 2018 (lin Investment income percentage from 2017	port Percenta , column (f), divic adule A, Part III, lin t Income Perc ne 10c, column (Schedule A, Part	ge led by line 13, colu ne 15 centage f), divided by line III, line 17	mn (f)) 13, column (f))	· · · · · · · · · · · · · · · · · · ·	. 15 16 17 18	% % %
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Sect 15 16 Sect 17 18 19 a	organization, check this box and stop here is tion C. Computation of Public Support Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche tion D. Computation of Investmen Investment income percentage for 2018 (line Investment income percentage from 2017 331/3% support tests - 2018. If the org 17 is not more than 331/3%, check the	port Percenta , column (f), divic edule A, Part III, lin t Income Perc ne 10c, column (Schedule A, Part ganization did n is box and sto	ge led by line 13, colu ne 15 centage f), divided by line III, line 17 ot check the bo p here. The org	mn (f)) 13, column (f)) k on line 14, and anization qualifies	l line 15 is more as a publicly	15 16 17 18 e than 331/3%, s supported organic	% % % and line ization . ►
Sect 15 16 Sect 17 18 19 a	organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche tion D. Computation of Investmen Investment income percentage for 2018 (lin Investment income percentage from 2017 331/3% support tests - 2018. If the org 17 is not more than 331/3%, check th 331/3% support tests - 2017. If the org	port Percenta , column (f), divic edule A, Part III, lin t Income Perc ne 10c, column (Schedule A, Part ganization did n is box and sto anization did not	ge led by line 13, colu ne 15 centage f), divided by line III, line 17 ot check the box o here. The org check a box on	mn (f)) 13, column (f)) k on line 14, and anization qualifies line 14 or line 19	I line 15 is more as a publicly a, and line 16 is	15 16 17 18 e than 331/3 %, a supported organia more than 331/3	% % % and line ization . ►
Sect 15 16 Sect 17 18 19 a	organization, check this box and stop here is tion C. Computation of Public Support Public support percentage for 2018 (line 8 Public support percentage from 2017 Sche tion D. Computation of Investmen Investment income percentage for 2018 (line Investment income percentage from 2017 331/3% support tests - 2018. If the org 17 is not more than 331/3%, check the	port Percenta , column (f), divice edule A, Part III, lin t Income Percent ne 10c, column (Schedule A, Part ganization did ne is box and stop anization did not this box and s	ge led by line 13, colu- ne 15 centage f), divided by line III, line 17 ot check the box o here. The org check a box on top here. The or	mn (f)) 13, column (f)) x on line 14, and anization qualifies line 14 or line 19 ganization qualifie	l line 15 is mora as a publicly a, and line 16 is s as a publicly	15 16 17 18 e than 331/3 %, a supported organic more than 331/; supported organic	% % % and line ization . ► 3 %, and ization ►

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

10b Schedule A (Form 990 or 990-EZ) 2018

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-	le A (Form 990 or 990-EZ) 2018		F	Page 5
Part	V Supporting Organizations (continued)		Vaa	No
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	NO
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
u	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	-		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations	-		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
I	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instruc	ctions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	24		
-	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
U	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
194	Schedule A (Form		990-E2	Z) 2018
JSA				

Schedule A (Form 990 or 990-EZ) 2018			Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov. 20, 1970 (expla	in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organi	zations r	nust complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(A) FIIOI Teal	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			

emergency temporary reduction (see instructions).

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

6

Sched Part	Ule A (Form 990 or 990-EZ) 2018 V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	Page 7
	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		ourrent real
2	Amounts paid to perform activity that directly furthers exen		ed	
-	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.	5		
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
C	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			
	· · · · · ·		Schedule	A (Form 990 or 990-EZ) 2018

Page 8

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A (Form 990 or 990-EZ) 2018

	tment of the Treasury al Revenue Service		► Go to www.irs.gov/Form990 for		latest information.	Inspection
If the	organization answer		on Form 990, Part IV, line 3, or Form		6 (Political Campaign Activi	
			Complete Parts I-A and B. Do not comp			
			on 501(c)(3)) organizations: Complete I	Parts I-A and C below.	Do not complete Part I-B.	
	Section 527 organizati		. ,		7/1 abbuirg Activities) they	
			on Form 990, Part IV, line 4, or Form that have filed Form 5768 (election un			
	()()		that have NOT filed Form 5768 (election		•	•
lf the	organization answer	ed "Yes,"	on Form 990, Part IV, line 5 (Proxy	•		•
	(see separate instruction set in the second se	-				
			anizations: Complete Part III.		Employer ide	ntification number
	ENCE & ART	COOPE	IN UNION FOR THE ADVANCE.	MENI OF	13-556	
		if the c	organization is exempt under	section 501(c) or		
			organization's direct and indirect p			
'	definition of "politica			onnear campaign a		
2	•		xpenditures (see instructions)		▶ \$	
3			campaign activities (see instruction			
-			organization is exempt under s			
1			cise tax incurred by the organizatio			
2	Enter the amount o	of any exc	cise tax incurred by organization m	anagers under sect	ion 4955 ► \$	
3			a section 4955 tax, did it file Form			
4a	Was a correction m	ade?				YesNo
	If "Yes," describe in	Part IV.				
Par	t I-C Complete	e if the c	organization is exempt under	section 501(c), e	xcept section 501(c)(3	5).
1	Enter the amount of	directly e	expended by the filing organization	n for section 527 e	exempt function	
2			ng organization's funds contributed			
			es			
3			enditures. Add lines 1 and 2. En			
4 5			e Form 1120-POL for this year?			
5			s. For each organization listed, en			
			tributions received that were prom			
	as a separate segre	gated fur	nd or a political action committee (PAC). If additional s	pace is needed, provide i	nformation in Part IV.
	(a) Name		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's	contributions received and
					funds. If none, enter -0	promptly and directly delivered to a separate
						political organization. If
						none, enter -0
(1)						
(-)						
(2)						
. ,						
(3)						
(4)						
(5)						
(6)						
For P	aperwork Reduction	Act Notic	e, see the Instructions for Form 990 o	r 990-EZ.	Schedul	e C (Form 990 or 990-EZ) 201

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OMB No. 1545-0047

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

Political Campaign and Lobbying Activities

SCHEDULE C

(Form 990 or 990-EZ)

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

(see separate instructions), then	or Form 990-EZ, Fart V, mie 550 (Floxy
Section 501(c)(4), (5), or (6) organizations: Complete Part III.	
e of organization THE COOPER UNION FOR THE ADVANCEMENT OF	Employer identification number
LENCE & ART	13-5562985
rt I-A Complete if the organization is exempt under section 501(c) or is a section	on 527 organization.
Provide a description of the organization's direct and indirect political campaign activities in F	Part IV. (see instructions for
definition of "political campaign activities")	
Political campaign activity expenditures (see instructions)	.▶\$
Volunteer hours for political campaign activities (see instructions)	
rt 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	▶ \$
Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes No
Was a correction made?	Yes No

-		OPER UNION FOR THE ADVANCEMENT O	F 13-5	562965 Page Z
Ра	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
Α		longs to an affiliated group (and list in Part IV e and share of excess lobbying expenditures).	ach affiliated group mem	per's name,
в	Check ► if the filing organization ch	ecked box A and "limited control" provisions app	oly.	
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
k c c	 Total lobbying expenditures to influence Total lobbying expenditures (add lines 1 Other exempt purpose expenditures Total exempt purpose expenditures (add 	public opinion (grass roots lobbying) a legislative body (direct lobbying) a and 1b) d lines 1c and 1d) e amount from the following table in both		
	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.		
		5% of line 1f)		
ł		ess, enter -0-		
i		ss, enter -0-		
j	If there is an amount other than zero	on either line 1h or line 1i, did the organiza	tion file Form 4720	
		<u></u>		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 separate instructions for lines 2a through 2f.)

	Lobbying Expen	ditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Page	3

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

For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		a)	(b)
	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?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.		Х	
с	Media advertisements?		Х	
d	Mailings to members, legislators, or the public?		Х	
е	Publications, or published or broadcast statements?		Х	
f	Grants to other organizations for lobbying purposes?	Х		32
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	
i	Other activities?		Х	
i	Total. Add lines 1c through 1i			32
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	
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?			
De	A III A Complete if the experimetion is exempt under costion 504(a)(4) costion 504	() (=)		

r ai t III-A	complete in the organization is exempt under section 501(c)(4), section 501(c)(5), or section
	501(c)(6).

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

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

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

Part IV **Supplemental Information**

Schedule C (Form 990 or 990-EZ) 2018

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, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

JSA

Schedule C (Form 990 or 990-EZ) 2018

Page 4

Schedule C (Form 990 or 990-EZ) 2018

Part IV Supplemental Information (continued)

PART II-B, LINE 1F

A PORTION (.8%) OF THE MEMBERSHIP DUES PAID TO THE NATIONAL ASSOCIATION OF COLLEGE AND UNIVERSITY BUSINESS OFFICERS (NACUBO) SUPPORTS THE ORGANIZATION'S HIGHER EDUCATION LOBBYING EFFORTS. IN ADDITION, FROM TIME TO TIME, MANAGEMENT MAY CONTACT ELECTED OFFICIALS TO DISCUSS AND EXPRESS AN OPINION ON LEGISLATION THAT HAS BEEN PROPOSED, SHOULD BE PROPOSED OR IS ALREADY ENACTED, THAT IS IMPORTANT TO COOPER UNION. THE TIME AND ANY EXPENSE ASSOCIATED WITH THESE CONTACTS IS INSIGNIFICANT AND, AS SUCH, HAVE NOT BEEN CALCULATED.

JSA

	IEDULE D 'm 990)	Complete if	the organization answered 8, 9, 10, 11a, 11b, 11c, 11c	l "Yes" on Form 990, d, 11e, 11f, 12a, or 1	,	OMB No. 1545-0047
	rtment of the Treasury al Revenue Service	► Go to www.irs.gov	Attach to Form 990. Form990 for instructions a		nation.	Open to Public Inspection
Name	of the organization	THE COOPER UNION FOR T	HE ADVANCEMENT OF	<u>,</u>	Employer identifica	ation number
	ENCE & ART				13-55629	85
Pa		tions Maintaining Donor Adv			Accounts.	
	Complete	e if the organization answered				
			(a) Donor advise	d funds	(b) Funds and	other accounts
1		nd of year				
2		of contributions to (during year)				
3		of grants from (during year)				
4		at end of year				
5	-	ion inform all donors and donor	-			
•	-	anization's property, subject to the	-	-		Yes No
6	-	ion inform all grantees, donors, a				
		e purposes and not for the bene		•		Yes No
Pa		nissible private benefit?	<u> </u>			
Га		e if the organization answered	"Yes" on Form 990 P	art IV line 7		
1		servation easements held by the				
		n of land for public use (e.g., rec			of a historically im	portant land area
		of natural habitat	,		of a certified histo	
	Preservatio	n of open space				
2		a through 2d if the organization h	eld a qualified conservat	ion contribution in	the form of a con	servation
	-	last day of the tax year.	•	[End of the Tax Year
а		onservation easements		[2a	
b		tricted by conservation easements			2b	
с	-	rvation easements on a certified			2c	
d	Number of conse	rvation easements included in (o	c) acquired after 7/25/06	6, and not on a		
		isted in the National Register			2d	
3	Number of conse	rvation easements modified, trar	nsferred, released, exting	uished, or termin	ated by the organ	nization during the
	tax year 🕨					
4	Number of states	where property subject to conse	ervation easement is locat	ed 🕨		
5	Does the organiz	ation have a written policy reg	garding the periodic mo	onitoring, inspecti	ion, handling of	
	violations, and enf	orcement of the conservation ea	sements it holds?			Yes No
6	Staff and volunteer	hours devoted to monitoring, inspec	cting, handling of violations	, and enforcing cons	servation easements	during the year
	▶					
7	Amount of expense	ses incurred in monitoring, inspec	ting, handling of violation	s, and enforcing co	onservation easem	ents during the year
	▶\$					
8		vation easement reported on line				
_)(4)(B)(ii)?				
9		ibe how the organization reports				
		d include, if applicable, the text of counting for conservation easeme		anization's financi	al statements that	describes the
Da		tions Maintaining Collections		asures or Other	Similar Assots	
га		e if the organization answered			Similar Assets	•
1.0		v	· · · · ·			t and halanaa ahaat
1a	works of art, hist	n elected, as permitted under Sl torical treasures, or other simila ovide, in Part XIII, the text of the fo	ar assets held for publi	c exhibition, educ	cation, or researc	ch in furtherance of
ŀ						
b		n elected, as permitted under a torical treasures, or other simila				
		ovide the following amounts relat				
		ded on Form 990, Part VIII, line 1	0		►\$	
		ed in Form 990, Part X				
2		n received or held works of a				
	•	s required to be reported under S				5
а		on Form 990, Part VIII, line 1				
	Assets included in	Form 990, Part X				

For Pa	perwork Re	duction	Act Notice, see t	the Instructions	for Fo	orm 990.
JSA 8E1268 1.000	1					
021200 1.000		700J	7/14/2020	8:30:38	AM	V 18-8.6F

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1	3-	55	629	85

		COOPE	R UNION	FOR TH	le advar	ICEMEI	N'I' O	F.		13-556	52985		•
-	dule D (Form 990) 2018	<u> </u>			· ·			•	<u></u>				age 2
	rt III Organizations Maintaini											<u>,</u>	
3	Using the organization's acquisition		sion, and o	other reco	ords, chec	k any c	of the	follow	ing that a	are a sigr	nificant u	se o	f its
	collection items (check all that app	ly):			_								
а	Public exhibition			d		or exch	ange	progra	ms				
b	Scholarly research			е	Other								
С	Preservation for future gene												
4	Provide a description of the organ	nization's	collections	s and exp	lain how	they fu	rther	the or	ganization	's exemp	t purpose	e in	Part
	XIII.												
5	During the year, did the organization	on solicit	or receive of	donations	of art, hist	orical ti	reasu	res, or	other simi	lar			
	assets to be sold to raise funds rath	ner than t	o be maint	ained as p	art of the	organiz	ation'	s colle	ction?		Yes		No
Ра	rt IV Escrow and Custodial A												
	Complete if the organiza	ation ans	wered "Ye	es" on Fo	rm 990, F	Part IV,	line	9, or r	eported a	an amoui	nt on Fo	m	
	990, Part X, line 21.												
1a	Is the organization an agent, truste				-					_			
	included on Form 990, Part X?									L	Yes		No
b	If "Yes," explain the arrangement i	n Part XI	I and com	olete the fo	ollowing tal	ole:							
										Amount			
С	Beginning balance						1c						
d	Additions during the year						1d						
е	Distributions during the year						1e						
f	Ending balance						1f					_	
	Did the organization include an am										Yes		No
b	If "Yes," explain the arrangement i	n Part XI	I. Check h	ere if the e	explanatior	has be	en pr	ovided	on Part XI			-	
Ра	rt V Endowment Funds.												
	Complete if the organiza	ation ans	wered "Ye	es" on Fo	rm 990, F	Part IV,	, line	10.			-		
		(a) Cu	rrent year	(b) Pri	ior year	(c) Tw	o year	s back	(d) Three y	years back	(e) Four y	ears b	oack
1a	Beginning of year balance	826,3	15,440.	798,91	L9,435.	777,	133,	930.	738,48	7,768.	717,6		
	Contributions	5,4	10,030.	6,63	39,467.	1,	899	,205.	1,76	3,319.	4,3	54,	912
	Net investment earnings, gains,												
•	and losses	83,1	86,970.	66,38	39,642.	53,	891,	,216.	70,33	0,367.	49,3	86,	355
d	Grants or scholarships	57,0	33,783.	45,63	33,104.	34,	004,	,916.	33,44	7,524.	32,8	81,	599
	Other expenditures for facilities												
Ū	and programs												
f	Administrative expenses												
	End of year balance	857,8	78,657.	826,31	15,440.	798,	919,	435.	777,13	3,930.	738,4	87,	768
2	Provide the estimated percentage	of the cu	rrent vear	end halan	ce (line 1a	colum	າ (ລ))	held as					
a	Board designated or quasi-endown		from your	%	oo (iiilo 19,	oolaini	(u))						
b	Permanent endowment > 11.0	000 %											
С	Temporarily restricted endowment	▶ 89.	.0000 %										
	The percentages on lines 2a, 2b, a	and 2c sh	ould equal	100%.									
3a	Are there endowment funds not in	the poss	ession of tl	ne organiz	ation that	are hel	d and	d admir	nistered for	r the			
	organization by:										Ŷ	′es	No
	(i) unrelated organizations										3a(i)		Х
	(ii) related organizations										3a(ii)		Х
b	If "Yes" on line 3a(ii), are the relate	ed organi	zations liste	d as requi	red on Sch	edule F	R?				3b		
4	Describe in Part XIII the intended u	uses of th	e organiza	tion's end	owment fu	nds.							
Pa	rt VI Land, Buildings, and Equ	uipment.			000				о г	000 D		4.0	
	Complete if the organize	ation and			1					1			•
	Description of property			other basis tment)	(b) Cost (0	or other b other)	asis		cumulated eciation	(0	 Book valu 	le	
1a	Land				1	L50,0	00.				15	0,0	00.
b	Buildings				235,5	552,82	24.	101,3	78,894.		134,17	3,9	30.
с	Leasehold improvements				9,5	539,2	75.	4,5	55,210.		4,98	4,0	65.
d	Equipment				35,7	766,04	44.	32,5	94,631.		3,17	1,4	12.
е	Other												
	I. Add lines 1a through 1e. (Column		t equal Forr	n 990, Pai	rt X, colum	n (B), lii	ne 10	c.)			142,47	9,4	07.
										Sched	ule D (Forr	n 990) 2018

THE COOPER UNION FOR THE ADVANCEMENT OF 13-5562985 Schedule D (Form 990) 2018 Page 3 Part VII **Investments - Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: Cost or end-of-year market value (including name of security) (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) REAL ESTATE AND OTHER 724,638,656 FMV (B) LIMITED PARTNERSHIPS 49,655,027. FMV 24,837,692 (C) HEDGE FUNDS FMV (D) FUNDS OF FUNDS 6,453,442. FMV (E) (F) (G) (H) 805,584,817 Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ► Investments - Program Related. Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) LIABILITY UNDER CHARITABLE TRU 4,921,694 (3) (4)

 (9)
 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►
 4,921,694.

 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII JSA 8E1270 1.000 Schedule D (Form 99

(5) (6) (7) (8)

Х

Schedu	le D_(Form 990) 2018		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	_	
b	Donated services and use of facilities	_	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part		ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
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. (This must equal Form 990, Part I, line 18.).	5	
Part	XIII Supplemental Information.		
Provic 2; Par	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	art V, line 4; Pa mation.	art X, line
SEE	PAGE 5		

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e chicadale E (i	6111 666) 2010			-	_
Part XIII	Supplemental Informati	on	(C	ontinued)	

Schedule D (Form 990) 2018

PART V, LINE 4 - ENDOWMENT FUNDS

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

PART V, LINE 1B - ENDOWMENT CONTRIBUTIONS

THIS AMOUNT REPRESENTS THE SUM OF:

4,460,953 CONTRIBUTIONS TO THE ENDOWMENT

949,077 RECLASSIFICATION OF RESTRICTED ASSETS TO ENDOWMENT ASSETS

5,410,030

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PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE FROM THE CONSOLIDATED FINANCIAL THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND ART AND THE C.V. STARR RESEARCH FOUNDATION ARE EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE "IRC"). ASTOR PLACE IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(2) OF THE IRC. THE COLLEGE FOLLOWS THE PROVISIONS OF THE ACCOUNTING STANDARD CODIFICATION ("ASC") 740, ACCOUNTING FOR UNCERTAINTIES IN INCOME TAXES. ASC 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS STANDARD PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS ONLY IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO

THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

Part XIII Supplemental Information (continued)

THE COLLEGE IS EXEMPT FROM FEDERAL AND NEW YORK STATE INCOME TAXATION BY VIRTUE OF BEING AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE IRC AND SIMILAR PROVISIONS OF THE NEW YORK STATE TAX CODE. NEVERTHELESS, THE COLLEGE MAY BE SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE IRC. THE COLLEGE BELIEVES THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS WITHIN ITS 2019 AND 2018 CONSOLIDATED FINANCIAL STATEMENTS.

Schedule D (Form 990) 2018

SOTENCE & ART 13=5562985 Part I YES NO 1 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?	SCIENCE & ART 13-5562985 Part I	SCHEDULE E (Form 990 or 99) Department of the Tre Internal Revenue Serv	asury ice	Schools ► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.	Ope Insp	20 en to bectio	Publi on	
Part1 VES NO 1 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 indude a statement of its racially nondiscriminatory policy toward students in all its chorothures, 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 broadoats 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 its serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II. 4a X 3 Records indicating the racial composition of the student body, faculty, and administrative stat? 4a X 4 Does the organization maintain the following? 4a X 4 Does the organization maintain the stolerships? 4a X 4 Does the organization orgons, and scholarships? 4a X 4 Copies of all catalogues, brochures, announcements, and other written communications? 4d X 4 Copies of all catalogues, brochures, announcements, and other written solicit co	Part I ves its 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?	•		COOPER UNION FOR THE ADVANCEMENT OF			ber	
1 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'. I 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 schelarships? 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 X 4 Does the organization maintain the following? 4a X 4 Does the organization maintain the following? 4a X 4 Does the organization maintain the following? 4a X 4 Does the organization maintain the following? 4a X 4 Does the organization or on the student body, faculty, and administrative staff? 4a X 5 Does the organization or on its behalf to solicit contributions? 4d X 4 Copies of all material used by the organization or on its behalf to	1 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? I I X 2 Does the organization include a statement of its racially nondiscriminatory policy toward students and its prochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? I 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 programs, and scholarships and other financial assistance are awarded on a racially nondiscriminatory policy through newspaper or broadcast media 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X 4 Does the organization discriminatory policy through newspaper or broadcast media 4d X 5 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X 4 Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 5a X 5 Does the organization discriminate by race in any way with respect to: 5a X 6	Part I						
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 x SEE SUPPLEMENTAL PAGE 3 x Image: service in the following? 4 a x A Records indicating the racial composition of the student body, faculty, and administrative staff?. 4 a x Image: service in the following? 4 a x Image: service in any way with respect to: 5 a x Image: service in any way with respect to: 5 a x Image: service in any way with respect to: 5 a x I	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 X SEE SUPPLEMENTAL PAGE 4 X Does the organization maintain the following? 4a. X b Records indicating the racial composition of the student body, faculty, and administrative staff? 4a. X c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4d. X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d. X if you answered "No" to any of the above, please explain. If you need more space, use Part II. 5a. X b Admissions policies? 5d. X c Employment of faculty or administrative staff? 5d. X g Athletic programs? 5g. X f Use of facilities? 5g. X f Use of facilities? 5g. X g Athletic programs? 5g. X f Use of facilities? 5g. X f Use of the organization activities? 5g. X g Athletic programs? 5g. X g Athletic programs? 5g. X <tr< td=""><td>bylaws, oth 2 Does the c brochures, programs, a</td><td>er governin organizatior catalogues and scholars</td><th>g instrument, or in a resolution of its governing body? in include a statement of its racially nondiscriminatory policy toward stu- and other written communications with the public dealing with study ships?</th><td>idents in all its ent admissions,</td><td></td><td>x</td><td></td></tr<>	bylaws, oth 2 Does the c brochures, programs, a	er governin organizatior catalogues and scholars	g instrument, or in a resolution of its governing body? in include a statement of its racially nondiscriminatory policy toward stu- and other written communications with the public dealing with study ships?	idents in all its ent admissions,		x	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff?	4 Does the organization maintain the following? 4 X a Records indicating the racial composition of the student body, faculty, and administrative staff?	during the in a way t describe. If	period of s hat makes "No," pleas	olicitation for students, or during the registration period if it has no solici the policy known to all parts of the general community it serves? I e explain. If you need more space, use Part II	tation program, f "Yes," please	3	X	
a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a x b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b x c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c x d Copies of all material used by the organization or on its behalf to solicit contributions? 4d x 5 Does the organization discriminate by race in any way with respect to: 5a x b Admissions policies? 5b x c Employment of faculty or administrative staff? 5c x d Scholarships or other financial assistance? 5d x g Athletic programs? 5f x f Use of facilities? 5f x g Athletic programs? 5g x h Other extracurricular activities? 5g x h Other extracurricular activities? 5h x	a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b X c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4d X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d X j vou answered "No" to any of the above, please explain. If you need more space, use Part II. 4d X							
nondiscriminatory basis? 4b X c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d X if you answered "No" to any of the above, please explain. If you need more space, use Part II. 5a X j Does the organization discriminate by race in any way with respect to: 5a X a Students' rights or privileges? 5a X c Employment of faculty or administrative staff? 5c X d Scholarships? 5d X f Use of facilities? 5f X f Use of facilities? 5f X f Use of facilities? 5g X h Other extracurricular activities? 5g X if you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 5h X	nondiscriminatory basis? 4b X c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d X if you answered "No" to any of the above, please explain. If you need more space, use Part II. 4d X		•	•		4a	x	
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d Copies of all material used by the organization or on its behalf to solicit contributions?	d Copies of all material used by the organization or on its behalf to solicit contributions? 4d X If you answerd "No" to any of the above, please explain. If you need more space, use Part II. 5 5 5 5 7 5 Does the organization discriminate by race in any way with respect to: 5a 5a X b Admissions policies? 5b X c Employment of faculty or administrative staff? 5c X d Scholarships or other financial assistance? 5d X f Use of facilities? 5f X g Athletic programs? 5g X h Other extracurricular activities? 5h X if you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 5h X f Use of facilities? 5h X f Use of facilities? 5h X f Other extracurricular activities? 5h X if you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 5h X 6a Does the organization receive any financial aid or assistance from a gov					40		
a b b c	a bops of an material decision of any of the above, please explain. If you need more space, use Part II. 5 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?. b Admissions policies? c Employment of faculty or administrative staff?. d Scholarships or other financial assistance?. f Use of facilities? f Use of facilities? f Use of facilities? f Yes" to any of the above, please explain. If you need more space, use Part II. f Use of facilities? f Use of facilities? f Yes" to any of the above, please explain. If you need more space, use Part II. f Yes" to any of the above, please explain. If you need more space, use Part II. f Yes" to any of the above, please explain. If you need more space, use Part II. f Yes" to any of the above, please explain. If you need more space, use Part II. f Sh X f Does the organization receive any financial aid or assistance from a governmental agency? Sa					-		
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f Use of facilities? 5f X g Athletic programs? 5g X h Other extracurricular activities? 5h X lf you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 5h X	f Use of facilities? 5f X g Athletic programs? 5g X h Other extracurricular activities? 5h X lf you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 5h X 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a X	d Scholarship	os or other	financial assistance?		5d		X
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h Other extracurricular activities?	h Other extracurricular activities?. 5h X If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 5h X 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a X	f Use of facili	ties?			5f		x
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Image: Comparison of the above is a comparison o	g Athletic pro	grams?			5g		x
						5h		x
						•	v	

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 7 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II 7 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) 2018

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Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also 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

\$48,298

	HEDULE F rm 990)		Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.						
	rtment of the Treasury al Revenue Service	► G	o to www.irs.go		o Form 990. Instructions and the latest int	formation.		Open to Public nspection	
Name	e of the organization T	HE COOPER	UNION FOR	THE ADVANC	CEMENT OF	I	Employer identific	ation number	
SCI	ENCE & ART						13-55629	85	
Pa 1	Form 990, F For grantmakers.	Part IV, line 14t Does the organ antees' eligibilit	 nization maintant ty for the grant 	in records to s s or assistance	United States. Completion States and the selection criteri	f its grants	and other	Answered "Yes" on	
2	outside the United	States.	Ū	·	ocedures for monitoring t		Ū	d other assistance	
3	·		.		e duplicated if additional sp		,	(0	
	(a) Region		(b) Number of offices in	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as,	a prog	ity listed in (d) is fram service,	(f) Total expenditures for	

		the region	agents, and independent contractors in the region	investments, grants to recipients located in the region)	describe specific type of service(s) in the region	and investments in the region
(1)	CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		19,103,764.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
<u>(10)</u>						
<u>(11)</u>						
(12)						
(13)						
(14)						
<u>(15)</u>						
<u>(</u> 16)						
(17)						
3a b	Subtotal Total from continuation sheets to Part I					19,103,764.
	Totals (add lines 3a and 3b) perwork Reduction Act Notice, see	e the Instruction	s for Form 990.		Schedul	19,103,764. e F (Form 990) 2018

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 8E1274 1.000 4492NM 700J 7/14/2020 8:30:38 AM V 18-8.6F

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, 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 noncash assistance	(h) Description of noncash 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	er total number of recipient organe IRS, or for which the grantee	anizations listed abo	ve that are recognized as (ided a section 501(c)(3) e	charities by the	foreign country, re	cognized as ta	x-exempt ►					

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2018

JSA

Page 2

Schedule F (Form 990) 2018

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	EAST ASIA/PACIFIC	129.	3,077,843.	CR. STU. ACC			
(2) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	EUROPE/ICELAND/GREENLAND	14.	356,487.	CR. STU. ACC			
(3) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	MIDDLE EAST/NORTH AFRICA	4.	95,600.	CR. STU. ACC			
(4) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	NORTH AMERICA	7.	164,925.	CR. STU. ACC			
(5) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	RUSSIA/NEWLY IND. STATES	1.	22,275.	CR. STU. ACC			
(6) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	SOUTH AMERICA	6.	152,649.	CR. STU. ACC			
(7) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	SOUTH ASIA	8.	185,562.	CR. STU. ACC			
(8) SCHOLARSHIPS, FELLOWSHIPS, GRANTS	CENT. AMERICA/CARIBBEAN	4.	126,012.	CR. STU. ACC			
(9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							
17)							
18)							

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

Schedule F (Form 990) 2018

JSA

Page 3

Schedu	ıle F (Form 990) 2018		Page 4
Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? 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)	X Yes	s 🗌 No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)	Yes	s 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	s 🗌 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</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund</i> (see Instructions for Form 8621)	X Yes	s 🗌 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)	X Yes	s 🗌 No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	s X No
			Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

Part V Supplemental Information 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):

SCHEDULE F, PART V COOPER UNION INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, THE COLLEGE'S INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865. TO THE EXTENT SUCH A FORM WAS COMPLETED, IT HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

JSA

CHEDULE G	••	Information R	• •		•	•	OMB No. 1545-004
Form 990 or 990-EZ)	Complete if	the organization answe organization entered	ered "Yes" on more than \$1	Form 990, P 5,000 on For	art IV, line 17, 18, or 1 m 990-EZ, line 6a.	9, or if the	2018
epartment of the Treasury			n to Form 990				Open to Public
nternal Revenue Service		Go to www.irs.gov/Forn			the latest instructions.		Inspection
lame of the organization SCIENCE & ART	THE COOPER UN	NION FOR THE	ADVANCEN	IEN'I' OF		Employer identificati	on number
	ing Activities. Co	mplete if the ora	anization a	answered	"Yes" on Form		17.
	D-EZ filers are not						
1 Indicate whether	the organization ra	ised funds through	any of the	following	activities. Check a	all that apply.	
a X Mail solicitat	tions	е			non-government g		
	email solicitations	f			government grants	S	
c X Phone solici		g	Spec	cial fundra	ising events		
			with any in	امتيام	aludian officers d	line etere tructeee	
2a Did the organizat	s listed in Form 990						X Yes
b If "Yes," list the							
compensated at	least \$5,000 by the	organization.		<i>,</i> .	-		
							1
(i) Name and addr	ess of individual			draiser have	(iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid t
or entity (fu	ndraiser)	(ii) Activity		r control of utions?	from activity	fundraiser listed in col. (i)	(or retained by) organization
			Yes	No			
1							
ARTS MANAGER	LLC, DEVOS I	SOLICITING		Х		100,000	•
2						0.025	
VERTREP CONSU	LTING, LLC	SOLICITING		Х		8,935	•
3							
4							
5							
6							
7							
8							
9							
10							
otal				►		108,935	
	which the organiza	ation is registered	or licensed	l to solicit	contributions or	has been notified	l it is exempt fro
registration or lic	ensing.						
FL,MD,NY,							

	events with gross receipts gro	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GOLF TOURNAMENT (event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	18,016.			18,016
R	 Less: Contributions Gross income (line 1 minus) 	6,000.			6,000
	line 2)	12,016.			12,016
	4 Cash prizes				
	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs	7,865.			7,865
Exp	7 Food and beverages				
Direct	8 Entertainment				
	9 Other direct expenses	1,364.			1,364
_	rt III Gaming. Complete if the org \$15,000 on Form 990-EZ, lin		Yes" on Form 990, I	Part IV, line 19, or (c) Other gaming	reported more than (d) Total gaming (add col. (a) through col. (c))
evel					
Revenue	1 Gross revenue				
	1 Gross revenue 2 Cash prizes				
enses					
enses	2 Cash prizes				
	2 Cash prizes3 Noncash prizes				
enses	 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 			Yes% No	
enses	 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 	Yes %	Yes%		
enses	 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 	Yes % No No 2 through 5 in colu	Yes%	<u>No</u> ►	

Schedule G (Form 990 or 990-EZ) 2018

JSA

THE	COOPER	UNION	FOR	THE	ADVANCEMENT	OF
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	THE COOPER UNION FOR THE ADVANCEMENT OF	13-5562985	
Sched	ule G (Form 990 or 990-EZ) 2018		Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entit		
	formed to administer charitable gaming?		No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events book		
	records:		
	Name ►		
	Address ►		
15 0	Deep the organization have a contract with a third party from whom the organization receives a	romina	
IDa	Does the organization have a contract with a third party from whom the organization receives g		No
h	revenue? If "Yes," enter the amount of gaming revenue received by the organization ► \$ a		
D	amount of gaming revenue retained by the third party \blacktriangleright \$		
с	If "Yes," enter name and address of the third party:		
U	in res, enter hame and address of the third party.		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name		
	Gaming manager compensation ► \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming pro	ceeds to	
	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga	nizations	
	or spent in the organization's own exempt activities during the tax year 🕨 \$		
Part	Supplemental Information. Provide the explanation required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition (see instructions).		
PAR	T I, 2B, LINES 1 AND 2		
THE	COOPER UNION DOES NOT TRACK GROSS RECEIPTS FROM EACH FUNDRAISER'S		
SOL	ICITING ACTIVITIES.		

Schedule G (Form 990 or 990-EZ) 2018

SCHEDULE I (Form 990)				Assistance t ndividuals in			-	OMB No. 1545-0047
ζ γ			•	wered "Yes" on F				2018
Department of the Treasury	P		-	ttach to Form 990				Open to Public
Internal Revenue Service		► Go t	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization	THE COOPER UNION 1	FOR THE A	DVANCEMENT	OF			Employer identi	ication number
SCIENCE & ART							13-556	2985
Part I General I	nformation on Grants and	Assistance	9					
	zation maintain records to su							
	eria used to award the grants							X Yes No
2 Describe in Part	IV the organization's proced	ures for mon	itoring the use	of grant funds in the	e United States.			
	nd Other Assistance to De ne 21, for any recipient th		-					I "Yes" on Form 990,
1 (a) Name and	d address of organization 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 noncash assistan	
(1)		_						
(2)		-						
(3)		-						
(4)		-						
(5)		-						
(6)		-						
(7)		-						
(8)		-						
(9)		-						
(10)		-						
(11)		-						
(12)		-						
3 Enter total numb	per of section 501(c)(3) and g per of other organizations liste on Act Notice, see the Instruction	ed in the line	1 table					► ► Schedule I (Form 990) (2018)

Schedule I (Form 990) (2018)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FEDERAL SEOG GRANT	15.	108,800.		N/A	N/A
2 PRIZES, INTERNSHIP & FELLOWSHIPS	218.	307,417.		N/A	N/A
3 SCHOLARSHIPS	771.	25,125,255.		N/A	N/A
4					
5					
6					
7					

information.

SUPPLEMENTAL INFORMATION

THE COLLEGE HISTORICALLY AWARDED FULL-TUITION SCHOLARSHIPS TO ALL

ENROLLED STUDENTS. FOLLOWING A PROVISIONAL REDUCTION IN 2014 OF

SCHOLARSHIPS TO A MINIMUM 50% OF TUITION FOR FISCAL REASONS, THE COLLEGE

IS NOW EXECUTING A BOARD-APPROVED PLAN WITH A GOAL OF RETURNING WITHIN

TEN YEARS TO ITS PRACTICE OF AWARDING FULL-TUITION SCHOLARSHIPS TO ALL

ENROLLED STUDENTS IF THE COLLEGE MEETS ITS FINANCIAL TARGETS. (CURRENTLY

THE AVERAGE STUDENT RECEIVES 76%.)

THE COLLEGE DESIGNATED A TUITION RATE OF \$44,550 FOR FULL-TIME

UNDERGRADUATE STUDENTS FOR THE 2018-2019 ACADEMIC YEAR. STUDENTS WHO CAN

Schedule I (Form 990) (2018)

JSA

Schedule I (Form 990) (2018)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2					
3					
4					
5					
3					
7					

information.

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.

SCH	EDULE J	Comper	ารล	tion Information	l	OMB N	No. 1	545-0	047
(For	m 990)			, Trustees, Key Employees, and Highest		9	M	10	
				nsated Employees Inswered "Yes" on Form 990, Part IV, line	23.		U.		
	nent of the Treasury		Atta	ch to Form 990. or instructions and the latest information		Ope			
_	Revenue Service of the organization	THE COOPER UNION FOR THE			Employer identific			ctio	n
	ENCE & ART				13-55629				
Part	Question	s Regarding Compensation							
								Yes	No
1a		propriate box(es) if the organization pro				orm			
	990, Part VII,	Section A, line 1a. Complete Part III to	prov	ide any relevant information regarding	g these items.				
	First-cla	ss or charter travel	Х	Housing allowance or residence for	•				
		or companions		Payments for business use of perso					
		emnification and gross-up payments		Health or social club dues or initiati					
	Discretio	onary spending account		Personal services (such as maid, ch	auffeur, chef)				
b	If any of the or reimburse	boxes on line 1a are checked, did the ment or provision of all of the ex	he o kpens	rganization follow a written policy researces described above? If "No," con	egarding paym nplete Part III	ent to			
	explain					. 1	b	X	
2	-	anization require substantiation prior			-				
		stees, and officers, including the CEC						37	
						. 2	2	X	
3		n, if any, of the following the filing organ							
	related organ	CEO/Executive Director. Check all the ization to establish compensation of the		O/Executive Director, but explain in P					
	· · ·	nsation committee	X	Written employment contract					
		dent compensation consultant	X	Compensation survey or study					
	X Form 99	00 of other organizations	X	Approval by the board or compensation	ation committee	e			
4	organization of	ar, did any person listed on Form 990, or a related organization:			-				
а		verance payment or change-of-control p	-				a	Х	
b		, or receive payment from, a suppleme					b	Х	
С		, or receive payment from, an equity-ba				. 4	c		X
	If "Yes" to an	y of lines 4a-c, list the persons and p	rovid	le the applicable amounts for each i	tem in Part III.				
	Only section	FO4(-)(0) FO4(-)(4) and FO4(-)(00) a		in diana muud aamuulata linaa 5.0					
-		501(c)(3), 501(c)(4), and 501(c)(29) o	-	-	O D <i>i</i>				
5		isted on Form 990, Part VII, Section A n contingent on the revenues of:	, ine	ra, did the organization pay or accrue	any				
а		ion?				5	ia		X
b		rganization?					b b		X
~		e 5a or 5b, describe in Part III.					~		
6		isted on Form 990, Part VII, Section A	, line	1a, did the organization pay or accrue	any				
		n contingent on the net earnings of:							
а		ion?				. 6	ia		Х
b	Any related o	rganization?				. 6	b		Х
		e 6a or 6b, describe in Part III.							
7		listed on Form 990, Part VII, Section							
_		described on lines 5 and 6? If "Yes," d				•• –	7		X
8	-	ounts reported on Form 990, Part VII,	-		-				
		I contract exception described in	-				<u> </u>		x
0		ine 8, did the organization also fol					8		
9							9		
	riegulations s	ection 53.4958-6(c)?					3		L

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

Schedule J (Form 990) 2018

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 on 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 aren't 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-MIS	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)	in column (B) reported as deferred on prior Form 990
MITCHELL LIPTON TILL 9/	(i)	196,537.	0.	89,816.	17,858.	10,504.	314,715.	
VICE PRESIDENT OF ENROLLMENT	(ii)	0.	0.	0.				
NADER TEHRANI	(i)	299,793.	0.	2,236.	30,594.	9,396.	342,019.	
2 ^{DEAN/PROF. OF ARCHITECTURE}	(ii)	0.	0.	0.				
LAURA SPARKS	(i)	499,308.	0.	504.	74,001.	180,227.	754,040.	
PRESIDENT	(ii)	0.	0.	0.				
DANIELLE C. DAUGHTRY	(i)	180,513.	0.	404.	18,321.	1,606.	200,844.	
GOVERNANCE/EXT AFFAIRS OFFICER	(ii)	0.	0.	0.				
RICHARD STOCK	(i)	228,002.	0.	0.	23,000.	36,051.	287,053.	
DEAN, SCHOOL OF ENGINEERING	(ii)	0.	0.	0.				
JOHN RUTH	(i)	265,917.	0.	1,806.	27,327.	29,794.	324,844.	
6 VP-FIN/ADMIN, TREASURER	(ii)	0.	0.	0.				
ROBERT HOPKINS (UNTIL 9	(i)	85,508.	0.	214,906.	7,481.	27,110.	335,005.	
7 ^{CHIEF TECHNOLOGY OFFICER}	(ii)	0.	0.	0.				
NATALIE BROOKS	(i)	229,933.	0.	0.			229,933.	
8 ^{CHIEF TALENT LEADER}	(ii)	0.	0.	0.				
PETER BUCKLEY	(i)	209,603.	0.	4,552.	21,092.	35,759.	271,006.	
DEAN/PROF. OF HUMANITIES 9	(ii)	0.	0.	0.				
STEPHEN BAKER	(i)	0.	0.	128,905.		328.	129,233.	
10 ^{VP OF STUDENT AFFAIRS}	(ii)	0.	0.	0.				
KEITH STOKELD 8/17-12/1	(i)	158,853.	0.	1,206.	16,650.	31,282.	207,991.	
11 ^{INT. DIR. FIN/ADMIN, TREASURER}	(ii)	0.	0.	0.				
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

Part ||| Supplemental Information

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 1, LINE 1A

THE PRESIDENT IS PROVIDED WITH HOUSING AND CLEANING SERVICES AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE UNIVERSITY, WHICH REQUIRES THE PRESIDENT TO BE IN CLOSE PROXIMITY TO THE CAMPUS TO ATTEND TO EMERGENCY MATTERS AND TO USE HER HOME AS AN EXTENSION OF HER OFFICE FOR MEETINGS, BUSINESS ENTERTAINING, AND OTHER SIMILAR FUNCTIONS. HOUSING VALUED AT \$157,500 WAS INCLUDED AS NONTAXABLE COMPENSATION ON SCHEDULE J, PART II, COLUMN (D).

PART II, COLUMN (III)

INCLUDED IN "OTHER REPORTABLE COMPENSATION" (PART II, COLUMN (III)) ARE

SEVERANCE PAYMENTS MADE TO THE FOLLOWING INDIVIDUALS IN THE FOLLOWING

AMOUNTS:

ROBERT HOPKINS - \$210,962.62

STEPHEN BAKER - \$128,905.02

MITCHELL LIPTON - \$89,287.68

PART 1, LINE 4B

PRESIDENT LAURA SPARKS RECEIVED NON-QUALIFIED DEFERRED COMPENSATION UNDER

JSA 8E1505 1.000 Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

JSA

Part III Supplemental Information

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.

A 457(F) RETIREMENT PLAN DURING CALENDAR YEAR 2018. THE AMOUNT, \$6,000,

IS DISCLOSED IN FORM 990, SCHEDULE J, PART II, COLUMN (C).

Page 3

						Persons		-		No. 15	545-00	,
Form 990 or 990-EZ) ►Co	omplete if the o	28b, or 28c	, or Form 9	990-EZ, Part V,	line 38	a or 40b.	26, 27, 2	8a,		20	18	_
epartment of the Treasury nternal Revenue Service	►Go to			m 990 or Form r instructions a		2. a latest information.				pen To spectio		C
lame of the organization TH	ie cooper i	JNION FOR	THE A	DVANCEMENT	OF	E	Employer	identifi	cation	numbe	r	
SCIENCE & ART							13-	5562	985			
						501(c)(29) organ 25a or 25b, or Fo			art V.	line 4()b.	
1 (a) Name of disqualified			nship betwee	en disqualified pers			scription				(d) Correct
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
2 Enter the amount of				•		•	•		•			
under section 4958									\$			
3 Enter the amount of t	ax, if any, on II	ne 2, above,	reimpurse	ed by the orga	nizatio	on	• • • •	••• •	• \$_			
Part II Loans to and/o	r From Interes	ted Persons										
				rm 990-EZ. Pa	art V. li	ine 38a or Form 9	90. Part	IV. lir	ne 26:	or if th	ne	
organization rep							,	,	,			
(a) Name of interested person	(b) Relationship	(c) Purpose of		(-) Origin		(f) Delever due	(a) In (default?	(h) An	proved	(i) W	
	with organization	., .	(d) Loan to c	, , ,		(f) Balance due	(9)			ard or	agree	men
	with organization	loan	from the organization	principal arr		(f) Balance due	(9)	- Cradin -		ard or hittee?	agree	ment
	with organization	., .	from the organization	principal am		(f) Balance due	Yes	No	by bo			1
(1)	with organization	., .	from the organization	principal am		(f) Balance due		1	by bo comm	nittee?	agree Yes	1
	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(2)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		
(2) (3)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(2) (3) (4)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(1) (2) (3) (4) (5) (6)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		Nc
(2) (3) (4) (5) (6) (7)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(2) (3) (4) (5) (6) (7) (8)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(2) (3) (4) (5) (6) (7) (8) (9)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(2) (3) (4) (5) (6) (7) (8) (9) 10)	with organization	., .	from the organization	principal am				1	by bo comm	nittee?		1
(2) (3) (4) (5) (6) (7) (8) (9) 10) rotal			from the organization' To From	principal am		(f) Balance due		1	by bo comm	nittee?		1
(2) (3) (4) (5) (6) (7) (8) (9) 10) Total Grants or Assis	Stance Benefit	ing Interest	from the organization' To From	principal am	►	\$		1	by bo comm	nittee?		1
(2) (3) (4) (5) (6) (7) (8) (9) 10) Total	stance Benefit organization a	ing Interesto inswered "Ye	rom the organization To Fror	principal am	► /, line 2	\$		No	by bo comm	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) otal Complete if the (a) Name of interested person	stance Benefit organization a	ing Interest nswered "Ye	rom the organization To Fror	principal am	► /, line 2	\$	Yes	No	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) otal Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) otal Part III Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS (2)	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) fotal Part III Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS (2) (3)	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) fotal	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) fotal Part III Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS (2) (3) (4) (5)	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) Total Part III Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS (2) (3) (4) (5) (6)	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) Total Part III Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS (2) (3) (4) (5) (6) (7)	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	
(2) (3) (4) (5) (6) (7) (8) (9) 10) Total Part III Grants or Assis Complete if the (a) Name of interested person (1) MERIT SCHOLARSHIPS (2) (3) (4) (5) (6)	stance Benefit organization a (b) Relationshi person and	ing Interest nswered "Ye	rom the organization To Fror	principal am principal am n S. rm 990, Part IV ount of assistance	► /, line 2	\$ 27. (d) Type of assistance	Yes	(e)	Purpos	No No	Yes	

Schedule L (Form 990 or 990-EZ) 2018

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	haring of nization's enues?	
				Yes	No	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
10)						

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Inspection

Name of the organization

SCIENCE & ART

opert	у					
THE	COOPER	UNION	FOR	THE	ADVANCEMENT	OF
	GOODED					0.7

Employer identification	number
13-5562985	

Par	I Types of Property			1			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribu		
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household						
Ũ	goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	Х	39.	6,503,326.	FAIR MARKET	VALU	E
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 ►()						
26	Other ►()						
27	Other ►()						
28	Other ►()						
29	Number of Forms 8283 received						
	which the organization completed F	Form 8283,	Part IV, Donee Acknowledg	ement	29		
						Yes	No
30a	During the year, did the organizat				-		
	28, that it must hold for at least th	-					X
	to be used for exempt purposes for		olaing period?			d	
	If "Yes," describe the arrangement i		ionoo nollou that as when	the review of our	nonoton de rel		
31	Does the organization have a	• ·				X	
22-	contributions?						
JZa	Does the organization hire or use		•			a X	
۲	contributions? If "Yes," describe in Part II.					u 11	
ы 33	If the organization didn't report an	amount in a	olumn (c) for a type of prov	perty for which column (a)) is checked		
55	describe in Part II.			perty for which column (a)			
For P	aperwork Reduction Act Notice, see the Inst	uctions for Fo	rm 990.		Schedule M	(Form 99(0) 2018

Part II Supplemental Information. 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.

FORM 990, SCHEDULE M, LINE 32A

TO THE EXTENT THAT THE COOPER UNION RECEIVES ANY NON-CASH DONATIONS

(USUALLY IN THE FORM OF SECURITIES, BONDS, ETC), THE ORGANIZATION MAY

EMPLOY ITS INVESTMENT ADVISOR TO CONVERT THE INVESTMENTS INTO CASH BY

SELLING THEM.

Page 2

Schedule M (Form 990) (2018)

SCHEDULE O (Form 990 or 990-EZ)

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.



Department of the Treasury Internal Revenue Service

SCIENCE & ART

THE COOPER UNION FOR THE ADVANCEMENT OF

ORGANIZATION'S MISSION

990 PART III, LINE 1: VISION: THE COOPER UNION FOR THE ADVANCEMENT OF SCIENCE AND ART IS DEDICATED TO PETER COOPER'S RADICAL COMMITMENT TO DIVERSITY AND HIS FOUNDING VISION THAT FAIR ACCESS TO AN INSPIRING FREE EDUCATION AND FORUMS FOR COURAGEOUS PUBLIC DISCOURSE FOSTER A JUST AND THRIVING WORLD.

MISSION: OUR MISSION IS TO SUSTAIN THE COOPER UNION AS A FREE CENTER OF LEARNING AND CIVIC DISCOURSE THAT INSPIRES INVENTIVE, CREATIVE, AND INFLUENTIAL VOICES IN ARCHITECTURE, ART, AND ENGINEERING TO ADDRESS THE CRITICAL CHALLENGES AND OPPORTUNITIES OF OUR TIME.

990 PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED AND REVIEWED INTERNALLY BEFORE BEING REVIEWED BY THE UNIVERSITY'S EXTERNAL AUDIT FIRM'S TAX SPECIALISTS (GRANT THORNTON). SUBSEQUENT TO REVISIONS, THE FORM 990 IS PROVIDED FIRST TO THE AUDIT COMMITTEE FOR REVIEW AND APPROVAL AND THEN TO THE FULL BOARD PRIOR TO FILING. THE AUDIT COMMITTEE AND FULL BOARD RECEIVE THE ENTIRE FORM 990 EXCEPT FOR SCHEDULE B WHICH IS NOT PROVIDED TO PROTECT THE CONFIDENTIALITY OF DONORS. SHOULD A COMMITTEE OR BOARD MEMBER DESIRE TO SEE SCHEDULE B THEY CAN REQUEST TO DO SO. GIFTS OR DONORS APPEARING ON SCHEDULE B THAT ARE OUT OF THE ORDINARY ARE DISCUSSED IN BOARD/COMMITTEE MEETINGS AS A MATTER OF THE UNIVERSITY'S GIFT ACCEPTANCE POLICY. 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 AND OFFICERS. ALL COMPLETED CONFLICT OF INTEREST QUESTIONNAIRES ARE RETURNED TO AND REVIEWED BY THE CORPORATE SECRETARY. A LIST OF ALL ACTUAL OR APPARENT CONFLICTS DISCLOSED ON THE QUESTIONNAIRES ARE THEN SUBMITTED TO THE CHAIR OF THE AUDIT COMMITTEE. ANY DISCLOSURES THAT THE AUDIT COMMITTEE CHAIR DETERMINES ARE ACTUAL OR APPARENT CONFLICTS ARE REVIEWED BY THE AUDIT COMMITTEE. THE AUDIT COMMITTEE AND, IF THE BOARD OF TRUSTEES, DOCUMENTS, THROUGH MEETING MINUTES, NECESSARY, ANY DECISIONS RELATED TO TRANSACTIONS INVOLVING AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST. THE SECRETARY TO THE BOARD OF TRUSTEES CONFLICTS DISCLOSED BY TRUSTEES, OFFICERS, AND MAINTAINS A LIST OF 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

JSA

990 PART VI, SECTION B, LINE 12C:

THE BOARD COMPENSATION COMMITTEE, ON BEHALF OF THE ENTIRE BOARD, FOLLOWS THE PROCEDURES REFERRED TO IN I.R.C. 4958 TO ESTABLISH A "REBUTTABLE PRESUMPTION OF REASONABLENESS" WITH RESPECT TO THE COMPENSATION OF THE PRESIDENT. THE COMMITTEE REVIEWS COMPARABLE COMPENSATION DATA FROM Page 2

Schedule O (Form 990 or 990	-EZ) 201	8							Page 2
Name of the organization	THE	COOPER	UNION	FOR	THE	ADVANCEMENT	OF	Employer identification number	
SCIENCE & ART								13-5562985	

INDUSTRY SURVEYS TO EVALUATE THE REASONABLENESS OF THE COMPENSATION AMOUNTS. THE RESULTS OF THIS PROCESS ARE RECORDED IN THE COMMITTEE'S MINUTES. ALL ADJUSTMENTS TO THE PRESIDENT'S COMPENSATION ARE APPROVED BY THE BOARD.

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 AT MANAGEMENT'S DISCRETION

990 PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES:

\$10,043,637

JSA

AMOUNT NOT YET RECOGNIZED AS A COMPONENT OF NET PERIODIC BENEFIT COST

990 PART III, LINE 4A: INSTRUCTION: (CONTINUED) THE COLLEGE ADMITS UNDERGRADUATES SOLELY ON MERIT AND HISTORICALLY AWARDED FULL-TUITION SCHOLARSHIPS TO ALL ENROLLED STUDENTS. FOLLOWING A PROVISIONAL REDUCTION IN 2014 OF SCHOLARSHIPS TO 50% OF TUITION DUE TO FISCAL REASONS, THE COLLEGE IS NOW EXECUTING A BOARD-APPROVED PLAN TO RESUME ITS PRACTICE OF AWARDING FULL-TUITION SCHOLARSHIPS TO ALL ENROLLED STUDENTS. THE INSTITUTION PROVIDES STUDENTS 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. ENROLLMENT FOR THE 2018-2019

Schedule O (Form 990 or 990	-EZ) 201	18							Page 2
Name of the organization	THE	COOPER	UNION	FOR	THE	ADVANCEMENT	OF	Employer identification number	
SCIENCE & ART								13-5562985	

ACADEMIC YEAR WAS 893 UNDERGRADUATE STUDENTS AND 107 GRADUATE STUDENTS

ACADEMIC YEAR WAS 893 UNDERGRADUATE STUDENTS A	AND 107 GRADUATE STUDENTS. ATTACHMENT 1						
990, PART VII- COMPENSATION OF THE FIVE HIGHES	ST PAID IND. CONTRACTORS						
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION					
SOS SECURITY LLC P.O. BOX 6373, 1915 ROUTE 46, PARSIPPANY, NJ 07054	SECURITY	605,878.					
ROBERTOS BUILDING MAINTENANCE, CO. P.O. BOX 1210 GRACIE STATION NEW YORK, NY 11103	MAINTENANCE	426,259.					
PATTERSON BELKNAP WEBB & TYLER LLP 1133 AVE. OF THE AMERICAS NEW YORK, NY 10036-6710	LEGAL SERVICES	471,448.					
DWD BUILDERS, INC. 1930 WILSHIRE BOULEVARD, SUITE 616 LOS ANGELES, CA 90057	CONSTRUCTION	768,194.					
UG2 LLC	CUSTODIAL SERVICES	385,885.					

116 HUNTINGTON AVENUE, 12TH FLOOR BOSTON, MA 02116

JSA

Schedule O (Form 990 or 990-EZ) 2018

THE COOPER UNION FOR THE ADVANCEMENT OF

SCHEDULE R	
(Form 990)	

Related Organizations and Unrelated Partnerships

► Go to www.irs.gov/Form990 for instructions and the latest information.

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.



13-5562985

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

SCIENCE & ART

Part I

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c) Legal domicile (state	(d) Total income	(e) End-of-year assets	(f) Direct controlling
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	or foreign country)	Total Income	Enu-or-year assets	entity
(1)					
(2)					
(3)					
(4)					
_(5)					
(6)					

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on 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	cont	g) 512(b)(13) rolled ity?
						Yes	No
(1) ASTOR PLACE HOLDING CORPORATION 13-6126686							
C/O COOPER UNION, 30 COOPER SO NEW YORK, NY 10003	PROPERTY	NY	501(C)(2)	N/A	COOPER UNION	X	
(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)	12-1	COOPER UNION	X	
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018

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

	i mere related erg	amzador		arthoromp during th	o lax your.	1						
(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		h) nortionate ntions?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging tner?	(k) Percentage ownership
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			Yes	No		Yes	No	
(1)												
(2)												
_(2)	-											
(3)												
(4)	_											
(5)												
(6)	_											
(7)	_											

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

			<u> </u>				
(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(1 controlle entity?
							Yes No
ANNUITY		N/A					x
ANNUITY		N/A					x
ANNUITY		N/A					x
	Primary activity Primary activity ANNUITY ANNUITY ANNUITY	Primary activity Legal domicile (state or foreign country)	Primary activity Legal domicile (state or foreign country) Direct controlling entity ANNUITY N/A ANNUITY N/A	(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e) Type of entity (C corp, S corp, or trust) ANNUITY N/A ANNUITY N/A	(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e) Type of entity (C corp, S corp, or trust) (f) Share of total income ANNUITY N/A	(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e) Type of entity (C corp, S corp, or trust) (f) Share of total income (g) Share of end-of-year assets ANNUITY N/A	(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e) Type of entity (C corp, S corp, or trust) (f) Share of total income (g) Share of end-of-year assets (h) Percentage ownership ANNUITY N/A

Schedule R (Form 990) 2018

JSA 8E1308 1.000

Schedule R (Form 990) 2018

8E1309 1.000

Part	Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Pai	rt IV, line 34, 35b, or 36.			
Note	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Ye	s No
1	During the tax year, did the organization engage in any of the following transactions with one or more	related organizations lis	sted in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1	a	X
b	Gift, grant, or capital contribution to related organization(s)			1	b	X
	Gift, grant, or capital contribution from related organization(s)			· · · · · ⊢	c	X
	Loans or loan guarantees to or for related organization(s)				d	X
е	Loans or loan guarantees by related organization(s)				e	X
f	Dividends from related organization(s)			1	f	
a	Sale of assets to related organization(s)			–	g	X
h	Purchase of assets from related organization(s)				h	X
i	Exchange of assets with related organization(s).				i	X
j	Lease of facilities, equipment, or other assets to related organization(s)				j	X
						x
k	Lease of facilities, equipment, or other assets from related organization(s)			· · · · · ⊢	k	
I	Performance of services or membership or fundraising solicitations for related organization(s)				1	X
	Performance of services or membership or fundraising solicitations by related organization(s).				m n 2	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					
0	Sharing of paid employees with related organization(s)			· · · · · '	<u>o</u> 2	
a	Reimbursement paid to related organization(s) for expenses.			1	р	Х
	Reimbursement paid by related organization(s) for expenses				q 2	K
r	Other transfer of cash or property to related organization(s)				r	X
S	Other transfer of cash or property from related organization(s)	<u></u>	<u> </u>	1	<u>s 2</u>	X
_2	If the answer to any of the above is "Yes," see the instructions for information on who must complete					
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved		
(1)	COOPER UNION GIFT ANNUITY	S	194,655.	CASH		
(2)	STANLEY ENSMINGER CHAR REMAINDER UNITRUST	S	259,918.	CASH		
(3)						
(4)						
(5)						
(6)						
JSA			Sci	hedule R (Fo	m 990	0) 2018

Schedule R (Form 990) 2018

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.

(state or f	(C) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		sections 512-514)	Yes	No			Yes	No	Ye	Yes	No	
_												
_												
												<u> </u>
	Primary activity	Primary activity Legal domicile (state or foreign country)	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Primary activity Legal domicile (state or foreign country) Predominant income (related, from tax under sections 512-514) Are all sec organiz Yes	Primary activity Legal domicile (state or foreign country) Predominant income (related, organizations? Are all partners section	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all pattners section Terms activity Share of total income	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners sections? Share of total income Share of end-of-year assets	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners sections 501(c)(3) organizations? Share of total income Share of end-of-year assets Disprogration allocation	Primary activity Legal domicile (state or foreign country) Predominant income (related, urrelated, excluded from tax under sections 512-514) Are all pattners sections? Share of total income Share of end-of-year assets Disproportionate allocations?	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all pattners section Share of total income Share of end-of-year assets Dispropritionate allocations? Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners section Share of total income Share of end-of-year assets Dispropritionate allocations? Code V - UBI amount in box 20 of Schedule K-1 (Form 1065) Gene man	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners section organizations? Share of total income Share of end-of-year assets Disproportionate allocations? Code V - UBI anount in box 20 of Schedule K-1 (Form 1065) General or managing partner?

Schedule R (Form 990) 2018

JSA

Schedule R (Form 990) 2018

Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.
SCHEDULE R, PART IV, COLUMN (C)
LINE (1): THE PLANNED GIVING POOL ACCOUNTS ARE LOCATED IN THE FOLLOWING
STATE: NY.
LINE (2): THE CHARITABLE REMAINDER TRUST ACCOUNTS ARE LOCATED IN THE
FOLLOWING STATES: CA, NJ, AND NY.
LINE (3): THE CHARITABLE GIFT ANNUITY ACCOUNTS ARE LOCATED IN THE
FOLLOWING STATES: AZ, CA, CT, FL, IL, MD, MA, NJ, NY, OR, PA, SC, VA, AND
WA.