| | | | EXTENDED TO MAY 15, 2020 | | _ | | | | | | |
|--------------------------------|--|--|--|--|----------------------------|--|--|--|--|--|--|
| | 00 | | Return of Organization Exempt From | n Income Tax | OMB No. 1545-0047 | | | | | | |
| Form | , 9 9 | JU | Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (| except private foundations) | 2018 | | | | | | |
| Decer | Imeni of I | he Treasury | Do not enter social security numbers on this form as it may | | Open to Public | | | | | | |
| | al Revonu | | Go to www.irs.gov/Form990 for instructions and the lat | est Information. | Inspection | | | | | | |
| AF | or the : | 2018 calend | ar year, or tax year beginning JUL 1, 2018 and ending | JUN 30, 2019 | | | | | | | |
| Bc | heck if oplicable: | C Name of | forganization | D Employer identificati | on number | | | | | | |
| a) | | THE CITY UNIVERSITY OF NEW YORK SCHOOL | | | | | | | | | |
| |]Address]change | OF L | AW FOUNDATION, INC. | | | | | | | | |
| |]Name]change | | usiness as | 11-323 | 5349 | | | | | | |
| | Initial return | | and street (or P.O. box if mail is not delivered to street address) Room/su | | 0 4520 | | | | | | |
| L | Final 2 COURT SQUARE 718-3 | | | | | | | | | | |
| | ated City or town, state or province, country, and ZIP or foreign postal code G cross receipts | | | | | | | | | | |
| | Jreturn Applica- | LONG | ISLAND CITY, NY 11101 | H(a) Is this a group retur | | | | | | | |
| | _tion pending | | nd address of principal officer: CAROLYN GEISEL | for subordinates? | ···· | | | | | | |
| | | SAME | AS C ABOVE | H(b) Are all subordinates includ | | | | | | | |
| | | | | 527 If "No," attach a list. | | | | | | | |
| | | | LAW.CUNY.EDU X Corporation Trust Association Other ► LY | H(c) Group exemption nu ear of formation: 1994 M St | | | | | | | |
| | | Summary | | ear or formation, x > > + [N St | ale ur legar uurinche, 141 | | | | | | |
| | rt I | Summary | be the organization's mission or most significant activities: SUPPORT | THE EDUCATIONAL | NEEDS OF | | | | | | |
| ce | 1 B | netty descrit | W SCHOOL | | | | | | | | |
| nan | _ | | x b if the organization discontinued its operations or disposed of m | ore than 25% of its net asset | Q | | | | | | |
| ver | | | ting members of the governing body (Part VI, line 1a) | | 20 | | | | | | |
| ဗိ | | | dependent voting members of the governing body (Part VI, line 1a) | ····· | 16 | | | | | | |
| 5 8 8 | | | of individuals employed in calendar year 2018 (Part V, line 2a) | | 17 | | | | | | |
| itie | Provide the organization of mission of missio | | | | | | | | | | |
| ctiv | | | d business revenue from Part VIII, column (C), line 12 | | 0. | | | | | | |
| Ă | | | business taxable income from Form 990-T, line 38 | | 0. | | | | | | |
| | | | | Prior Year | Current Year | | | | | | |
| ¢ | 8 C | ontributions | and grants (Part VIII, line 1h) | 1,557,659. | 1,990,343. | | | | | | |
| Revenue | | | ice revenue (Part VIII, line 2g) | 0. | 0. | | | | | | |
| eve | | | come (Part VIII, column (A), lines 3, 4, and 7d) | 59,490. | 573,542. | | | | | | |
| α | 11 0 | ther revonue | e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11o) | 248,896. | 149,407. | | | | | | |
| | 12 T | otal revenue | - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1,866,045. | 2,713,292. | | | | | | |
| | | | milar amounts paid (Part IX, column (A), lines 1-3) | 301,218. | 550,711. | | | | | | |
| | | | to or for members (Part IX, column (A), line 4) | | 0. | | | | | | |
| se | 15 S | Salaries, othe | er compensation, employee benefits (Part IX, column (A), lines 5-10) | 810,546. | 817,474. 0. | | | | | | |
| ens | 16a P | Professional f | r compensation, employee benefits (Part IX, column (A), lines 5-10) fundraising fees (Part IX, column (A), line 11e) sing expenses (Part IX, column (D), line 25) 7,583. | 0. | <u>U.</u> | | | | | | |
| Expenses | | | | 414,281. | 480,094. | | | | | | |
| | | • | es (Part IX, column (A), lines 11a-11d, 11f-24e) | 1,526,045. | 1,848,279. | | | | | | |
| | | | es. Add lines 13-17 (must equal Part IX, column (A), line 25) | 340,000. | 865,013. | | | | | | |
| - 0 | 19 F | levenue less | expenses. Subtract line 18 from line 12 | Beginning of Current Year | | | | | | | |
| Net Assets or Fund Balances | | atal ana ata (| Det V Res 16) | 6,215,277. | End of Year 6,740,132. | | | | | | |
| Bag | 20 T | - | Part X, line 16) s (Part X, line 26) | 147,797. | 202,015. | | | | | | |
| | 21 T 22 N | | fund balances, Subtract line 21 from line 20 | 6,067,480. | 6,538,117. | | | | | | |
| | irt II | Signatur | | • • • • • • | | | | | | | |
| | | | I declare that I have examined this return, including accompanying schedules and sta | tements, and to the best of my kn | owledge and belief, it is | | | | | | |
| | - | | Declaration of preparer other than officer) is based on all information of which prep | | (| | | | | | |
| | Ţ | N 7 | 10.11/1/1 | | | | | | | | |
| Sig | n | Signatur | e of difficer | Pate / | | | | | | | |
| Her | | CARC | DIYN GÉISEL, EXECUTIVE DIRECTOR | ON MIN | 1 | | | | | | |
| | | Type or | print name and title | 10 | | | | | | | |
| | 1 | Print/Type pre | parer's name Preparer's signature | Date Check | PTIN | | | | | | |
| Pald | | | . URBAN CPA DAVID A. URBAN CPA | 06/04/20 stl-employed | P00630018 | | | | | | |
| Prep | | Firm's name | ▶ EFPR GROUP, CPAS, PLLC | Firm's EIN 🕨 4 | 7-4526160 | | | | | | |
| Use | Only 🗍 | Firm's address | 5 6390 MAIN STREET SUITE 200 | | | | | | | | |
| | | | WILLIAMSVILLE, NY 14221 | Phone no. (716 |) 634-0700 | | | | | | |
| May | the IR | | is return with the preparer shown above? (see instructions) | | X Yes No | | | | | | |
| 8320 | 01 12-31- | -18 LHA I | For Paperwork Reduction Act Notice, see the separate instructions. | | Form 990 (2018) | | | | | | |
| | | | | | | | | | | | |

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| _ | THE CITY UNIVERSITY OF NEW YORK SCHOOL 990 (2018) OF LAW FOUNDATION, INC. 11-3235349 Page 2 |
|-------|--|
| Form | 990 (2018) OF LAW FOUNDATION, INC. 11-5255349 Page 2 till] Statement of Program Service Accomplishments |
| L'an | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefly describe the organization's mission: |
| • | CUNY LAW HAS A DUAL MISSION: TO INCREASE ACCESS TO LEGAL EDUCATION TO |
| | THOSE FROM COMMUNITIES UNDERREPRESENTED IN THE PROFESSION AND TO |
| | PREPARE ITS GRADUATES FOR PUBLIC INTEREST AND PUBLIC SERVICE PRACTICE. |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the |
| | prior Form 990 or 990-EZ? |
| | If "Yes," describe these new services on Schedule O. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. |
| 4a | (Code:) (Expenses \$ 549,151. including grants of \$) (Revenue \$ 149,407.) |
| | COURT SQUARE LAW PROVIDES QUALITY LEGAL REPRESENTATION ON A SLIDING FEE |
| | SCALE. AS A PILOT PROJECT FOUNDED IN 2016 BY THE NEW YORK CITY BAR |
| | ASSOCIATION, CUNY LAW, AND 19 LAW FIRMS, IT IS DESIGNED TO STUDY HOW TO |
| | BEST OPERATE A SUSTAINABLE CIVIL LEGAL SERVICES PRACTICE THAT CAN HELP |
| | CLOSE THE JUSTICE GAP FOR MODERATE MEANS INDIVIDUALS AND SMALL |
| | BUSINESSES. |
| | |
| | |
| | |
| | |
| | |
| | |
| 4b | (Code:) (Expenses \$ 685,250 · including grants of \$) (Revenue \$) (Revenue \$) |
| | WITH A FACULTY OF SOCIAL JUSTICE PRACTITIONERS AND A #2 RANKED CLINICAL |
| | PROGRAM IN THE NATION (US NEWS & WORLD REPORT), GRANTS ARE INVESTED TO |
| | ADVANCE: COMMUNITY AND ECONOMIC JUSTICE, HUMAN RIGHTS AND GENDER JUSTICE, AND IMMIGRATION AND NON-CITIZEN RIGHTS. SINCE 2009, CREATING |
| | JUSTICE, AND IMMIGRATION AND NON-CITIZEN RIGHTS. SINCE 2009, CREATING LAW ENFORCEMENT ACCOUNTABILITY & RESPONSIBILITY (CLEAR) HAS OFFERED |
| | FREE LEGAL REPRESENTATION AND CONSULTATION, KNOW-YOUR-RIGHTS WORKSHOPS, |
| | AND SUPPORT FOR COMMUNITY ORGANIZING FOCUSED ON MUSLIM, ARAB, SOUTH |
| | AND SUPPORT FOR COMMONTH ORGANIZING FOCUSED ON MUSHIM, ARAD, SOUTH ASIAN, AND OTHER COMMUNITIES IN NEW YORK CITY. |
| | ASTAN, AND OTHER COMMONITIES IN NEW TORK CITI: |
| | |
| | |
| | |
| 4c | (Code:) (Expenses \$ 550,711. including grants of \$ 550,711.) (Revenue \$) |
| | THE COST OF A LAW SCHOOL EDUCATION IS A MATTER OF GREAT CONCERN FOR |
| | THOSE ATTENDING CUNY LAW. THE MAJORITY OF THOSE ADMITTED ARE IN NEED OF |
| | FINANCIAL SUPPORT WITH A STUDENT BODY THAT IS LOW-INCOME, |
| | FIRST-GENERATION, NON-TRADITIONAL, AND MORE THAN 50% PEOPLE OF COLOR. |
| | WHILE TUITION AND FEES POSITION CUNY LAW AS ONE OF THE MOST AFFORDABLE |
| | PROFESSIONAL EDUCATION PROGRAMS IN THE NATION, IT HAS HAD LIMITED FUNDS |
| | AND NEEDS TO INCREASE FUNDING AVAILABLE TO AWARD SCHOLARSHIPS, PUBLIC |
| | INTEREST SUMMER GRANTS, AND GRANTS TO SUPPORT STUDENTS WHEN THEY ARE |
| | STUDYING FOR THE BAR EXAM. |
| | |
| | |
| | |
| 4d | Other program services (Describe in Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| 4e | Total program service expenses 1,785,112. |
| | Form 990 (2018) |
| 83200 | 2 12-31-18 |

| | THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC. 11-3235 | 349 | P | age 3 |
|-------------|---|------|----------|----------|
| Form | 990 (2018) OF LAW FOUNDATION, INC. 11 0000 t IV Checklist of Required Schedules | - 17 | | ige o |
| Par | | | Yes | No |
| | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| 1 | Is the organization described in section 50 (c)(o) or 4547 (c)(r) (one) and a prode reacting of the section of | 1 | Х | |
| • | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 2 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| 3 | 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 | | | |
| 4 | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | i |
| 5 | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| U | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| ' | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| 0 | 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 | | | |
| 9 | 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 | | | |
| 10 | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | X | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X | | | |
| | as applicable. | | | l |
| • | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| đ | Part VI | 11a | Х | |
| ь | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| Ŭ | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X_ |
| • | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| C | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | X |
| А | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | Γ | | |
| u | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| • | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | X | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| • | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | X | |
| 1 2a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| 120 | Schedule D, Parts XI and XII | 12a | X_ | |
| h | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "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 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | L | X |
| h | 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 | L | 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 | 1 | | |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | <u> </u> |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | 1 | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | 1 | | |
| •• | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | 1 | _ |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | <u> </u> | X |
| 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 | | X |
| 2 0a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | <u> </u> | — |
| 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 | | X |

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| | 11- | 32 | 35 | 349 | Page 4 |
|--|-----|----|----|-----|--------|
|--|-----|----|----|-----|--------|

| Form | 990 (2018) OF LAW FOUNDATION, INC. 11-323 | <u>5349</u> | P | age 4 |
|--------|--|--------------|--------------|--------------|
| Par | t IV 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 | x | |
| 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 |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| • . | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No," go to line 25a | . 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | <u>24b</u> | | |
| С | 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? | | | _ |
| 25a | 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 | | X |
| 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 |
| 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 | | х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| _, | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | x |
| • | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | ·· | | |
| 28 | | | | |
| _ | instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> | 28a | | х |
| a ⊾ | A family member of a current or former officer, director, trustee, or key employee? If "Yes, " complete Schedule L, Part IV | ·· | | Х |
| 0 | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| C | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | Х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | | X | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i> | 30 | | х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | x |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | _ | |
| UL. | Schedule N, Part II | . 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | Ĩ | | |
| | 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 | | | x |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | | X |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | l | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | . <u>35b</u> | ļ | ļ |
| 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 | | | x |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | 1 |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | ļ | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | 38 | x | |
| Pa | Note. All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| L | Check if Schedule O contains a response or note to any line in this Part V | . <u></u> . | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 95 | | |
| ъ | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 0 | | |
| с | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | <u>1c</u> | X | L |
| 02200 | 4 12.31-18 | Forr | n 990 | (2018 |

| 11-3235349 Page 5 |
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|-------------------|

| Form | 990 (2018) OF LAW FOUNDATION, INC. 11-3235 | 349 | Pa | age 5 | | | | |
|---------|---|-----------|-----|-------------|--|--|--|--|
| Par | | | - | | | | | |
| | | _ | 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 17 | <u> </u> | | | | | | |
| ь | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X | | | | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | X | | | | |
| 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 | | | | | | |
| | 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 | | | | |
| ь | If "Yes," enter the name of the foreign country: | | | 1 | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | <u>5a</u> | | X | | | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | <u>5b</u> | | X | | | | |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | <u>5c</u> | | | | | | |
| 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? | <u>6a</u> | | X | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | | | | | |
| | were not tax deductible? | 6b | | <u> </u> | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | <u> </u> | | | | |
| 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? | | | X | | | | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | · · · | | | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | _ | | v | | | | |
| | to file Form 8282? | 7c | | X | | | | |
| | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | |
| е | e big the organization receive any failed, and day of memory to pay premiume on a percent e entry in the second | | | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g 7h | | ┣── | | | | |
| h | I The organization received a contribution of ours, boats, an planes, or other tensions, and the englished and the englished and the englished of ours, boats, and planes, or other tensions, and the englished of ours, boats, and the englished of ours, and the englished | | | | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | | | | | |
| _ | sponsoring organization have excess business holdings at any time during the year? | 8 | | <u> </u> | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | 9a | | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9b | | ├ ── | | | | |
| Ь | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | | | | |
| | | - | | | | | | |
| | | - | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders | | | | | | | |
| | Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 1 | 1 | | | | | | |
| D | amounts due or received from them.) | | | | | | | |
| 12- | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | 1 | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | 1 | | | | | |
| ́13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 1 | | | | | | |
| is a | the second se | 13a | 1 | <u> </u> | | | | |
| đ | Note. See the instructions for additional information the organization must report on Schedule O. | | 1 | | | | | |
| b | and the second | | | | | | | |
| 5 | organization is licensed to issue qualified health plans | | | | | | | |
| с | | 1 | | | | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X | | | | |
| b | | 14b | | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | | | | | |
| | excess parachute payment(s) during the year? | 15 | 1 | X | | | | |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | X | | | | |
| • | If "Yes," complete Form 4720, Schedule O. | | | | | | | |

Form 990 (2018)

THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC.

| 1 | 1 - | 3 | 2 | 3 | 5 | 3 | 4 | 9 | Page | 6 |
|---|-----|---|---|---|---|---|---|---|------|---|
|---|-----|---|---|---|---|---|---|---|------|---|

Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| | Check if Schedule O contains a response or note to any line in this Part VI | <u></u> | | X |
|---------|--|-------------|----------|----------|
| Sec | | | | |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year1a20 | | | ·] |
| | 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 0. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent1b | | · | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | أحصنه |
| | officer, director, trustee, or key employee? | 2 | | X |
| 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 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | X |
| 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 - | | X |
| b | Lion A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year 1a 20 If there are material differences in voting rights among members of the governing body, of it the governing body detaget breact, rutuse, or key employee or similar committee, explain is Notellau. 16 Enter the number of voting members included in line 1a, above, who are independent. 16 16 Uid any officer, director, rutuse, or key employeer? 2 16 16 Did the organization delegate control over management duries customarily performed by or under the direct supervision 2 16 Did the organization baceme aware during the year of a significant diversion of the governing body? 2 2 Did the organization have members or stockholders? 10 10 16 2 Did the organization have members, stockholders? 10 <td></td> | | | |
| | | 7b | | X |
| 8 | Etion A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year 1a 20 If there are material differences in voting rights among members of the governing body, of if the governing body, of if the governing body, of if the governing body deltagets bread autionity to a receive committee, explain in Schedule 0. 1b 16 Did any officer, director, trustee, or key employees? 1b 16 16 Did the organization delegate control over management dulies customarily performed by or under the direct supervision 10 16 16 Did the organization make any significant changes to its governing documents since the prior Form 980 was filled? 10 10 17 17 Did the organization have members, stockholders? 0 10 16 17 17 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons who had the power to elect or appoint one or more members of the governing body? 2 2 2 18 18 18 12 2 2 Did the organization have members, or toker photypee listed in ArVII, Section A, who cannot be reached at the erganization instemporaneously document the meetings held or written actions undertaken during the yate by tholowing; 2 2 3 3 3 3 <td< td=""><td></td><td> </td></td<> | | | |
| а | The governing body? | 8 a | X | |
| 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 | | | |
| | | 9 | | <u> </u> |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10 a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | |
| | | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | | 12a | X | ļ |
| b | | 12b | X | L |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | , | | |
| | | 12c | X X | <u> </u> |
| 13 | - | 13 | X | |
| 14 | • | 14 | Δ | <u> </u> |
| 15 | | | | |
| | | | | X |
| a | | 15a | | X |
| b | | 15b | | |
| | | | | |
| 16a | | 160 | <u>-</u> | X |
| | | 16a | | |
| b | | | | |
| | | 16b | | I |
| <u></u> | | | | |
| | | · | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed P 112 | | availe | ahla |
| 18 | | Jooniy | uvall | |
| | | | | |
| 10 | | d finan | cial | |
| 19 | | a miali | Jai | |
| 20 | statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records | | | |
| 20 | MARIO CRESCENZO - 718-340-4314 | | | |

NY LONG ISLAND CITY, 111 CUNY SCHOOL OF LAW, 2 COURT SQUARE RM 5-107-H, Form 990 (2018)

832006 12-31-18

| Form 990 (2018) OF LAW F(| OUNDATIC |)N | ;] | INC | Ż. | | | | 11-3235 | 349 Page 7 |
|---|----------------------------------|--------------------------------|-----------------------|----------------|--------------|---|------------|---------------------------------------|----------------------------------|--------------------------|
| Part VII Compensation of Officers, I | Directors, T | rus | stee | es, l | Ke | y Ei | np | loyees, Highest C | ompensated | |
| Employees, and Independer | nt Contract | ors | | | | | | | | _ |
| Check if Schedule O contains a resp | onse or note to | an | y line | e in t | this | Part | VII | <u> </u> | | <u> </u> |
| Section A. Officers, Directors, Trustees, Key | Employees, a | nd I | ligh | est | Cor | npe | nsat | ted Employees | • | |
| 1a Complete this table for all persons required to | | | | | | | | | | |
| List all of the organization's current officers Enter -0- in columns (D), (E), and (F) if no compension for all of the organization's current key enters | sation was paid | d. | | | | | | | | compensation. |
| List the organization's five current highest c | ompensated e | mol | òver | es (o | the | r tha | n an | officer, director, truste | e, or kev emplovee) wł | no received report- |
| able compensation (Box 5 of Form W-2 and/or Bo | ox 7 of Form 10 |)99- | MIS | C) o | f mo | ore tl | nan | \$100,000 from the orga | inization and any relate | ed organizations. |
| • List all of the organization's former officers reportable compensation from the organization a | , key employee nd any related | es, a | ind h aniz | nigh: atior | est (ns | com | pens | sated employees who re | eceived more than \$10 | 10,000 of |
| List all of the organization's former director | rs or trustees | tha | t rec | eive | ed, ii | n the | cap | oacity as a former direct | tor or trustee of the or | ganization, |
| more than \$10,000 of reportable compensation f | rom the organi | zatio | on a | nd a | ıny r | relate | ed o | rganizations. | , | |
| List persons in the following order: individual trus and former such persons. | tees or directo | ors; i | nstit | utio | nali | trust | ees; | ; officers; key employee | s; highest compensate | ed employees; |
| Check this box if neither the organization n | or any related | ora | aniza | ation | | mne | nsat | ed any current officer. | director, or trustee. | |
| (A) | (B) | Г Г | 1 | . (0 | | mpe | loui | (D) | (E) | (F) |
| Name and Title | Average | | | Pos | itior | | : | Reportable | Reportable | Estimated |
| | hours per | box | unle | ss pe | rson | than is bot | h an | compensation | compensation | amount of |
| | week | | cer an | id a đ r | lirecto | or/trus | itee) T | from | from related | other |
| | (list any | Individual trustee or director | | | | | | the organization | organizations (W-2/1099-MISC) | compensation from the |
| · · | hours for related | e or d | tee | | | sated | ŀ | (W-2/1099-MISC) | (1033-10130) | organization |
| | organizations | truste | Institutional trustee | | yee | Highest compensated employee | | · · · · · · · · · · · · · · · · · · · | | and related |
| | below | ridual | Ĕ | 193 | Key employee | loyee | l la l | | | organizations |
| · · · · · · · · · · · · · · · · · · · | line) | Indi | Insti | Officer | Key | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Former | | | |
| (1) ARTHUR AIDALA | 0.50 | | | | 1 | | | | 0 | 0 |
| DIRECTOR | 0.00 | X | <u> </u> | | | | | 0. | 0. | 0. |
| (2) KITTY BATEMAN | 0.50 | | | | | | · | . o. | 0. | 0. |
| SECRETARY | 0.00 | X | <u> </u> | X | | - | | | 0. | 0. |
| (3) MARNIE BERK | 0.50 | x | | x | | | | 0. | 0. | 0. |
| CHAIR | 0.50 | ^ | - | | | - | | <u>v.</u> | | · · · |
| (4) MARY LU BILEK DIRECTOR | 0.00 | x | | | | | | 0. | 0. | 0. |
| (5) PAULA BOSCO | 0.50 | <u> </u> | | - | | ┼─ | <u> </u> | | | |
| VICE-CHAIR | 0.00 | x | | x | Ι. | | | 0. | 0. | 0. |
| (6) KERMITT BROOKS | 0.50 | | | | | | | | | |
| DIRECTOR | 0.00 | x | | | | | | 0. | 0. | 0. |
| (7) ERICA BUCKLEY | 0.50 | | | | | 1. | | | | |
| DIRECTOR | 0.00 | | | ÷ | | | | 0. | 0. | 0. |
| (8) RICHARD CELESTIN | 0.50 | | | | | | | | | |
| DIRECTOR | 0.00 | | | | | | | 0. | 0. | 0. |
| (9) ELIZABETH DICKINSON | 0.50 | | | | | | | | | |
| DIRECTOR | 0.00 | | | | L | | | 0. | 0. | 0. |
| (10) JUDITH FLAMENBAUM | 0.50 | | | | | | | | 0. | 0. |
| DIRECTOR | 0.00 | X | | <u> </u> | | | | 0. | <u> </u> | 0. |
| (11) ANTHONY P. GENTILE | 0.50 | | | x | | | | 0. | 0. | ο. |
| TREASURER | 0.00 | • | _ | ⊢ | | ┢ | <u> </u> | | 0. | |
| (12) LAURA GENTILE DIRECTOR | 0.00 | l v | | | | | | 0. | 0. | 0. |
| (13) CAROLYN GEISEL | 0.50 | | ┢─ | | + | + | | | | |
| EXECUTIVE DIRECTOR | 0.00 | x | | x | | | • | 0. | 0. | 0. |
| (14) HON. BRYANNE HAMILL | 0.50 | | <u> </u> | | + - | + | \vdash | | | |
| · DIRECTOR | 0.00 | 1x | | 1 | | | | 0. | 0. | 0. |
| (15) DENISE A. HOLZKA | 0.50 | _ | \uparrow | \vdash | 1 | \top | | 1 | | |
| TREASURER | 0.00 | | | 1 | 1 | | | 0. | 0. | 0. |
| (16) DEVIKA KEWALRAMANI | 0.50 | | 1 | 1 | 1 | 1 | ŀ | | | |
| DIRECTOR | 0.00 | | | | | | | 0. | 0. | 0. |
| (17) BRIAN O'DWYER | 0.50 | | | | Γ | | - | | | _ |
| DIRECTOR | 0.00 |] X [| 1 | | 1. | | 1 | 0. | 0. | 0. |

832007 12-31-18

Form 990 (2018)

THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC.

11-3235349 Page 8

| Form 990 (2018) OF LAW F | OUNDATI(|)N | ,] | INC | <u>. </u> | | | | 11-323 | 534 | 9 | Page 8 |
|--|--|----------------|-----------------------|----------------------------|--|---------------------|------------------|--|--|--------|--|---------------------------------|
| Part VII Section A. Officers, Directors, Trus | tees, Key Em | ploy | rees | , an | d Hi | ighe | st C | Compensated Employe | es (continued) | | | |
| (A) Name and title | (B) Average hours per | (do box | not c | (C Pos heck ss pe | C) itior more erson |) than is bot | one h an | (D) Reportable compensation | (E) Reportable compensation | | (F) Estima amour | ated nt of |
| | week (list any hours for related organizations below line) | te or director | Institutional trustee | Officer | | Highest compensated | | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | c | othe ompen from f organiz and rel rganiza | sation the ation lated |
| (18) STEVEN B. ROSENFELD | 0.50 | | | | | <u> </u> | | | | | | 0 |
| DIRECTOR | 0.00 | X | | | | <u> </u> | | 0. | 0 | • | | 0. |
| (19) RICK ROSSEIN DIRECTOR | 0.50 | x | | | | | | 0. | 0 | | | 0. |
| (20) REBECCA SEAWRIGHT DIRECTOR | 0.50 | x | | | | | | 0. | . 0 | • | | 0. |
| (21) REGINA SKYER | 0.50 | | | | 1 | | | | | | | |
| DIRECTOR (PART-YEAR) | 0.00 | X | | | | | | 0. | 0 | • | | 0. |
| (22) TAMMI STECKLER DIRECTOR (PART-YEAR) | 0.50 | x | | | | | | 0. | 0 | | | 0. |
| | | | | | | \vdash | | | | | | - |
| | | . | | - | | | | | | | | |
| | | ╞ | | | | | $\left \right $ | | | | | |
| | | | | - | | | \vdash | | | • | | • |
| the Sub total | | I | | <u> </u> | <u> </u> | <u> </u> | | 0. | 0 | • | | 0. |
| 1b Sub-total c Total from continuation sheets to Part V | | | | | | | - | 0. | 0 | | | 0. |
| d Total (add lines 1b and 1c) | ····· | | | | | <u></u> | | 0. | 0 | • | | 0. |
| 2 Total number of individuals (including but compensation from the organization | not limited to th | nose | e liste | ed a | bov | 'e) w | ho r | eceived more than \$100 |),000 of reportable | • | | 0 |
| | | | | | | | | | | | Ye | s No |
| 3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for | | | | | | | | nignest compensated e | | 3 | ₅₋∣ーー | X |
| 4 For any individual listed on line 1a, is the s | um of reportab | le c | omp | ens | atio | n an | d ot | ther compensation from | the organization | | | <u>x</u> |
| and related organizations greater than \$15 5 Did any person listed on line 1a receive or | | | | | | | | | | | <u>'</u> | |
| rendered to the organization? If "Yes," cor | | | | | | | | | | 5 | ; | X |
| Section B. Independent Contractors | | | | | | root | | that received more than | \$100,000 of compa | neatir | | <u> </u> |
| 1 Complete this table for your five highest c the organization. Report compensation for | | | | | | | | | | iiiaii | | • |
| (A) Name and busines | s address | N | ON | E | | | | (B) Description of | services | Com | (C) ipensa | tion |
| | | | | | | | | | | | | |
| · · · · · · · · · · · · · · · · | | | | | | | - | | | | | |
| , <u></u> _, <u></u> | | | _ | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | • | | | | <u> </u> | | | | | |
| 2 Total number of independent contractors | (including but | | imite | | - the | | iete | d above) who received t | nore than | | | |
| 2 Total number of independent contractors \$100,000 of compensation from the organ | | IULI | mme | | | 0 | 1216 | | | | | |

Form 990 (2018)

THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC.

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Form 990 (2018) OF LAW E Part VIII Statement of Revenue

| | | Check if Schedule O cont | ains a response | or note to any lin | e in this Part VIII | | 721 | |
|---|-------|---|-------------------|--------------------|--|---|---|--|
| 1 | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| ts s | 1 a | Federated campaigns | 1a | | | | | |
| Contributions, Gitts, Grants and Other Similar Amounts | | Membership dues | | | | | | |
| | | Fundraising events | | | | | | |
| L A E | | Related organizations | | | | | | |
| 5 | | Government grants (contribut | | 179,470. | | | | |
| Sig | | All other contributions, gifts, gran | | | | | | |
| ž je | T | | | 810,873. | | | | |
| 33 S | | similar amounts not included abo | | 76,931. | | | | |
| 0 P | Ŭ | Noncash contributions included in lines | | | 1,990,343. | | | |
| | h | Total. Add lines 1a-1f | | Business Code | 1,550,515. | ····· | | |
| | 2 a | | | business code | | | | |
| Program Service Revenue | | <u> </u> | <u> </u> | | | | | · · |
| je je | b | · | | | | | | · |
| ε§ | C | | | | ······································ | | | |
| a a | d | · · · · · · · · · · · · · · · · · · · | • | · · · · · · | · · · · · | | | |
| Ŝ. | e | | | | | | | · · · · · · · · · · · · · · · · · · · |
| - 1 | f | All other program service reve | | | · · · · | | | |
| | g | Total. Add lines 2a-2f | | | | | | |
| | 3 | Investment income (including | dividends, intere | est, and | 50,063. | | | 50,063. |
| i | | other similar amounts) | | | | | - | |
| | 4 | Income from investment of ta | | - | · · · · · | | | <u> </u> |
| | 5 | Royalties | | | | | | |
| 1 | | | (i) Real | (ii) Personal | | | | |
| | | Gross rents | | | | | | |
| | , þ | Less: rental expenses | | | | | | |
| | С | Rental income or (loss) | | | | | | · |
| | d | Net rental income or (loss) | | | | | | |
| 1 | 7 a | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | | assets other than inventory | 523,479. | | | | | |
| | b | Less: cost or other basis | | | | | | |
| | | and sales expenses Gain or (loss) | 0. | | | | | |
| | С | Gain or (loss) | 523,479. | | | | | E03 470 |
| | d | Net gain or (loss) | ····· | > | 523,479. | | | 523,479. |
| e | 8 a | Gross income from fundraisin | ng events (not | · · | | | | |
| evenue | | including \$ | of | | | | | |
| ě | | contributions reported on line | e 1c). See | | | | | |
| <u>ж</u> | | Part IV, line 18 | а | | | | | |
| Other Re | b | Less: direct expenses | b | | | | | . |
| <u>ا</u> ۲ | с | Net income or (loss) from fun | draising events | <u></u> | | | • • | ļ |
| | | Gross income from gaming a | ctivities. See | | | | | |
| | | Part IV, line 19 | [.] a | | | | | |
| | b | Less: direct expenses | | | | | | |
| | | Net income or (loss) from gan | | | | | | |
| · · | 10 a | Gross sales of inventory, less | s returns | | | | | · |
| | | and allowances | аа | | 1 | | | |
| | b | Less: cost of goods sold | | | | | <u></u> | · |
| L | c | Net income or (loss) from sale | es of inventory | | | | | |
| | | Miscellaneous Revenu | | Business Code | | | | _ |
| - [· | 11 a | COURT SQUARE LA | AW | 541100 | 149,407. | 149,407. | | |
| | b | | | | L | | | |
| | с | · | | L | | | | |
| | d | All other revenue | | | | | | <u> </u> |
| | е | Total. Add lines 11a-11d | | ► | 149,407. | | | |
| ! | 12 | Total revenue. See instructions | | ► | 2,713,292. | 149,407. | 0 | |
| 832009 | 12-31 | 1-18 | | | | | | Form 990 (2018 |

THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC.

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| Par | t IX Statement of Functional Expense | | | | |
|---------------|---|-----------------------------|------------------------------------|---|---|
| Sectio | on 501(c)(3) and 501(c)(4) organizations must comp | lete all columns. All othe | er organizations must co | mplete column (A). | <u> </u> |
| | Check if Schedule O contains a respons | se or note to any line in t | his Part IX | | <u></u> |
| Do n 7b, 8 | ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | | | | · · · |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 550,711. | 550,711. | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | , | · · · · · |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or, for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | <u> </u> | 622 566 | | <u>.</u> |
| 7 | Other salaries and wages | 622,566. | 622,566. | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 147,835. | 147,835. | | |
| 9 | Other employee benefits | 47,073. | 47,073. | | |
| 10 | Payroll taxes | 47,073. | 47,075. | | |
| 11 | Fees for services (non-employees): | | | | |
| а | Management | 6,000. | | 6,000. | |
| b | Legal | 26,698. | · · | 26,698. | |
| C | Accounting | 20,050. | | | |
| d | Lobbying | | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | <u> </u> |
| g | | 2,148. | | 2,148. | |
| | column (A) amount, list line 11g expenses on Sch 0.) | | | | |
| 12 | Advertising and promotion | | | | • |
| 13 | Office expenses | | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 17 | Occupancy Travel | , | | | |
| 17 | Payments of travel or entertainment expenses | | | | |
| 10 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 4,019. | | 4,019. | |
| 23 | Insurance | 10,025. | 5,598. | 4,427. | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line | | | | • 11 |
| | 24e amount exceeds 10% of line 25, column (A) | | | | |
| | amount, list line 24e expenses on Schedule 0.) PROGRAM EXPENSES | 376,527. | 376,527. | | |
| а | REUNION AND ALUMNI EVEN | 34,802. | 34,802. | · | |
| b | BAD DEBT | 12,292. | 51,002. | 12,292. | |
| C L | STAFF DEVELOPMENT AND R | 5,011. | | | 5,011 |
| d | | 2,572. | | ┝──────┤ | 2,572 |
| | All other expenses | 1,848,279. | 1,785,112. | 55,584. | 7,583 |
| 25 | Joint costs. Complete this line only if the organization | 1,040,210 | | | |
| 26 | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here Carlo and a following SOP 98-2 (ASC 958-720) | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | | |

Form 990 (2018)

Form **990** (2018)

THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC.

11-3235349 Page 11

| Form 990 (| | | LAW | FOUNDATI |
|------------|-------------------|-------|-----------|-----------------|
| Part X | Balance Sheet | | | |
| | Check if Schedule |) con | tains a r | esponse or note |
| | | | | |
| | | | | • |

| Pan | \sim | Balance Sneet | | | | | · · · · · · · · · · · · · · · · · · · |
|----------|--------|--|---------------|-------------------|---------------------------------------|--------|---------------------------------------|
| | | Check if Schedule O contains a response or not | e to any line | e in this Part X | (A) | | (B) |
| | | | | | (A) Beginning of year | | End of year |
| — | | Cash - non-interest-bearing | | | 1,787,219. | 1 | 1,685,854 |
| | 1 | | | | 527,482. | 2 | 528,691 |
| | 2 | Savings and temporary cash investments | 584,475. | 3 | 1,118,408 | | |
| | 3 | Pledges and grants receivable, net | | | 2,587. | 4 | 9,244 |
| | 4 | Accounts receivable, net Loans and other receivables from current and for | rmer officer | rs directors | | | |
| | 5 | trustees, key employees, and highest compensation | | rees Complete | | | • |
| | | Part II of Schedule L | | | ~ | 5 | |
| | 6 | Loans and other receivables from other disquali | | | | | |
| | 0 | section 4958(f)(1)), persons described in section | | | | | |
| | | employers and sponsoring organizations of sect | | | | | |
| | | employees' beneficiary organizations (see instr). | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 5,851. | 9 | 6,742 |
| | | Land, buildings, and equipment: cost or other | 1 | | | | |
| | 104 | basis. Complete Part VI of Schedule D | 10a | 185,517. | | · - / | |
| | h | Less: accumulated depreciation | 10b | 176,062. | 13,474. | 10c | 9,455 |
| | 11 | Investments - publicly traded securities | | | 3,275,624. | 11 | 3,340,748 |
| | 12 | Investments - other securities. See Part IV, line | | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 18,565. | 15 | 40,990 | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | 6,215,277. | 16 | 6,740,132 | | |
| | 17 | Accounts payable and accrued expenses | 62,678. | 17 | 100,599 | | |
| | 18 | Grants payable | | 18 | | | |
| | 19 | Deferred revenue | 75,518. | 19 | 99,220 | | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | · |
| | 21 | Escrow or custodial account liability. Complete | | | · · · | 21 | |
| | 22 | Loans and other payables to current and forme | | | | | • |
| | | key employees, highest compensated employe | es, and disc | ualified persons. | · · · · · · · · · · · · · · · · · · · | · | _ |
| | | Complete Part II of Schedule L | | | • | 22 | |
| | 23 | Secured mortgages and notes payable to unrel | ated third p | arties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelate | d third parti | ies | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | ayables to re | elated third | | | • |
| | | parties, and other liabilities not included on line | s 17-24). Co | mplete Part X of | | | 2 100 |
| | | Schedule D | | | 9,601. | | 2,196 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 147,797. | 26 | 202,015 |
| | | Organizations that follow SFAS 117 (ASC 95 | B), check he | ere 🕨 🖾 and | | | |
| 3 | | complete lines 27 through 29, and lines 33 a | nd 34. | | 913,863. | | 971,474 |
| | 27 | Unrestricted net assets | | | 2,545,619. | | 2,948,645 |
| | 28 | Temporarily restricted net assets | ••••• | ······ | | | 2,617,998 |
| | 29 | | | | 2,607,998. | 29 | |
| | | Organizations that do not follow SFAS 117 (A | ASC 958), c | heck here 🏲 📖 | | | |
| | | and complete lines 30 through 34. | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | <u></u> |
| | 31 | Paid in or capital surplus, or land, building, or e | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated in | | | 6,067,480. | 32 | 6,538,117 |
| - | 33 | Total net assets or fund balances | | | 6,215,277. | 33 | 6,740,132 |
| | 34 | Total liabilities and net assets/fund balances | | | 0,410,411. | 34 | Form 990 (20 ⁻ |

Form 990 (2018)

| | 11 | -32 | 353 | 349 | Page | 12 |
|--|----|-----|-----|-----|------|----|
|--|----|-----|-----|-----|------|----|

| Form | 990 (2018) OF LAW FOUNDATION, INC. | 11-323 | <u>5349</u> | Pag | _{le} 12 |
|------|--|------------|--------------------|--------------|------------------|
| Pa | t XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | . <u></u> | | | |
| | | | 0 7 1 ' | | <u></u> |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | | $\frac{2}{1}, 713$ | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | | 1,848 | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 13. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | | 6,06 | | |
| 5 | Net unrealized gains (losses) on investments | 5 | -394 | 4,3 | /0. |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 6,538 | 8,1 | <u>17.</u> |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | <u></u> | <u></u> | | |
| | | | ł | 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," explain in Schedule | Ο. | | | X |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2 a | | <u> </u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | lona | | | |
| | separate basis, consolidated basis, or both: | | | •. | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | نىي <u>ب</u> | المشم |
| b | Were the organization's financial statements audited by an independent accountant? | | <u>2b</u> | X | <u> </u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | , | <u> </u> | |
| | consolidated basis, or both: | | · · | | |
| | Separate basis Consolidated basis X Both consolidated and separate basis | | | | l |
| с | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | X | L. |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | | | احمم |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | ngle Audit | | | |
| | Act and OMB Circular A-133? | | - 3a | | <u>x</u> |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | <u></u> | 3b | | |
| | | · · | Form | 990 | (2018) |

| | · • | | | | | | | OMB No. 1545-0047 |
|--|-------------------------------|---------------------------------------|---|------------------------|--------------------|------------------------|------------------------|----------------------------|
| SCHEDULE | | Public Char | rity Status an | d Pub | lic Su | ipport | | 2010 |
| (Form 990 or 99 | ^{-EZ)} Co | mplete if the organi | ization is a section 501 | (c)(3) orga | nization | or a section | | ZU IO |
| | | | 7(a)(1) nonexempt cha | | | | | Open to Public |
| Department of the Treas Internal Revenue Service | Jry | | ttach to Form 990 or F /Form990 for instructio | | | nformation. | | Inspection |
| | | | | | | | Employer | identification number |
| Name of the organization THE CITY UNIVERSITY OF NEW YORK SCHOOL Emplo OF LAW FOUNDATION, INC. | | | | | | | | 1-3235349 |
| Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. | | | | | | | | |
| | | | | | | | | |
| | | | For lines 1 through 12, c | | |)(A)(i) | | |
| | | | n of churches described | | | ~~~~ | | |
| | | | Attach Schedule E (Form | | | n | | |
| | ital or a cooperative | nospital service orga | inization described in se | described | in soction | י;. n 170/h)(1)(Δ | (iiii) Enter | the hospital's name |
| | | ation operated in cor | njunction with a hospital | uescribeu | ···· | | Run, Cinci | ane noophal o name, |
| | d state: | with a framefit of a cal | lege or university owned | l or operat | ed by a d | wernmental | init describ | ed in |
| - | | | lege or university owned | or operat | eu by a gu | Sveninentar | | |
| | n 170(b)(1)(A)(iv). (C | | | action 17 | 0/6//4/// | (a) | | |
| 6 A fede | al, state, or local gov | vernment or governm | nental unit described in s | | UUJ(T)(A) | (v). Unit or from t | ho gonoral | nublic described in |
| | | | ntial part of its support f | om a gove | ennentai | | ne general | |
| | n 170(b)(1)(A)(vi). (C | - | 4)/A)/i) /Commission Dout | | | | | |
| | | | 1)(A)(vi). (Complete Part | | d in coniu | nction with a | land-grant | college |
| | | | in section 170(b)(1)(A)(i | | | | | |
| | | grant college of agric | ulture (see instructions). | Enter the | name, city | , and state o | The colleg | eor |
| , univers | | | | · · · | | no mombor | hin foon a | nd gross receipts from |
| 10 An org | anization that norma | lly receives: (1) more | than 33 1/3% of its sup | port from (| moro the | n 22 1/20/ of | ite europort | from gross investment |
| activiti | es related to its exen | npt functions - subjec | ct to certain exceptions, | and (2) no | more that | irod by the o | appization | after lune 30 1975 |
| | | | (less section 511 tax) fro | om busine: | sses acqu | ired by the o | gamzation | alter Julie 30, 1973. |
| See se | ction 509(a)(2). (Co | mplete Part III.) | | (-t. Caa | antion 60 | 0(a)(4) | | |
| 11 An org | anization organized | and operated exclusi | vely to test for public sa | iety. See s | ection ou | 19(a)(4). | orn out the | nurnoses of one or |
| 12 . An org | anization organized | and operated exclusi | vely for the benefit of, to | perform t | | Coo costion | | back the box in |
| more p | ublicly supported or | ganizations describe | d in section 509(a)(1) o | section : | nloto linos | 10 10 10 on | d 10a | |
| lines 1 | 2a through 12d that | describes the type o | f supporting organizatio | n and com | piece lines | 5 120, 121, di | u izy. broiopily by | aivina |
| а 🛄 Тур | I. A supporting orga | anization operated, s | upervised, or controlled | by its sup | | janization(s), | so of the o | upporting |
| | | | gularly appoint or elect a | i majority c | or the direc | ctors or trust | es or the s | upporting |
| orga | nization. You must o | complete Part IV, Se | ections A and B. | | | od organizati | n(a) by ba | vina |
| в 🛄 Тур | II. A supporting org | janization supervised | or controlled in connec | | s support | ed organizatio | no the sur | norted |
| | | | anization vested in the s | ame perso | ins that co | ontroi or man | ige ine sup | ported |
| | | t complete Part IV, | | | مانىتى مى | and functions | lly intograti | od with |
| с 🛄 Тур | III functionally inte | egrated. A supporting | g organization operated | | ations A | | iny integration | |
| | | |). You must complete I | | | | rtad argani | zation(c) |
| | | | orting organization oper | | | | | |
| | | | ation generally must sat | | | | o an allem | iveness |
| | | | nplete Part IV, Sections | | | | | |
| | | | written determination fro | | | атурет, туре | п, туретп | |
| | • • | | nally integrated support | | | | | |
| | | | | | •••••• | •••••• | | · |
| | following information | n about the supporte (ii) EIN | (iii) Type of organization | (iv) is the orga | nization listed | (v) Amount o | fmonetary | (vi) Amount of other |
| •• | nization | (1) 2.14 | (described on lines 1-10 | in your governi Yes | ng document? No | support (see i | - | support (see instructions) |
| | | · · · · · · · · · · · · · · · · · · · | above (see instructions)) | 100 | | · · · · · · · · · | | |
| | | | | | | | | |
| | ······. | | | | | | | |
| | | | | | | | | |
| | | | | | <u> </u> | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | · · |
| | · | ├ ───────── | | | ┝─── | <u> </u> | | <u>├</u> ─────── |
| | | | | | | | | |
| | | + | | | | | | <u>├──</u> ─── |
| Total | | L | | 1 | | | | <u> </u> |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

| Sch | edule A (Form 990 or 990-EZ) 2018 0 | F LAW FOUN | DATION, 1 | NC. | | | 5349 Page 2 |
|------|---|------------------------|---|---------------------------|---------------------|-----------------------|-------------------|
| | rt III Support Schedule for (| Draanizations | Described in a | Sections 170(D | | ndor Bort III. 16450 | y organization |
| | (Complete only if you checked | I the box on line 5, | 7, or 8 of Part I or | If the organization | ralled to quality u | nuer Part III. If the | organization . |
| | fails to qualify under the tests | listed below, pleas | se complete Part II | 1.) | | | · |
| | tion A. Public Support | | | | <u> </u> | | |
| 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 | | | 1 150 307 | 1 557 650 | 1 000 343 | 8 743 225 |
| | include any "unusual grants.") | 1,461,975. | 2,574,941. | 1,158,307. | 1,557,659. | 1,990,343. | 8,743,225. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | , | | | | 1 | |
| | or expended on its behalf | | | · | | | |
| 3 | The value of services or facilities | | | | | • | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | - 450 202 | 1 557 650 | 1,990,343. | 8,743,225. |
| | Total. Add lines 1 through 3 | 1,461,975. | 2,574,941. | 1,158,307. | 1,557,659. | 1,990,945. | 0,140,220. |
| 5 | The portion of total contributions | | | · · | | | |
| | by each person (other than a | | i | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | 417,810. |
| | column (f) | | | ` | | | 8,325,415. |
| | Public support. Subtract line 5 from line 4. | | I | | <u> </u> | | |
| | ction B. Total Support | | (1-) 0015 | (a) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| | endar year (or fiscal year beginning in) 🕨 | (a) 2014 1,461,975. | (b) 2015 2,574,941. | (c) 2016 1,158,307. | 1,557,659. | 1,990,343. | 8,743,225. |
| | Amounts from line 4 | 1,401,973. | 2,514,541. | | | | · |
| 8 | Gross income from interest, | | | | | | |
| • | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | 17,370. | 12,594. | 5,636. | 14,048. | 50,063. | 99,711. |
| _ | and income from similar sources | 17,5700 | | | | | |
| 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 | 3,300. | 3,180. | 46,381. | 3,180. | | 56,041. |
| | assets (Explain in Part VI.) Total support. Add lines 7 through 10 | | | | | | 8,898,977. |
| | Gross receipts from related activities | etc. (see instruction | | | | 12 | 398,303. |
| 12 | First five years. If the Form 990 is fo | r the organization's | s first, second, thir | d, fourth, or fifth ta | x year as a sectio | n 501(c)(3) | |
| 13 | organization check this box and sto | n here | · ··· - · , · · · · · · · · · · · · · · | | | <u>.</u> |) |
| Se | organization, check this box and sto ction C. Computation of Pub | ic Support Pe | rcentage | | | | |
| 14 | Public support percentage for 2018 (| line 6, column (f) d | ivided by line 11, c | olumn (f)) | | 14 | <u> 93.55 %</u> |
| 45 | Bublic support perceptage from 201 | 7 Schedule A Part | 11. line 14 | | | 15 | 98.43 % |
| 16 | a 33 1/3% support test - 2018. If the | organization did no | ot check the box o | n line 13, and line 1 | 4 is 33 1/3% or r | nore, check this b | ox and |
| | stop here. The organization qualifies | as a publicly supp | orted organization | 1 | | | |
| | b 33 1/3% support test - 2017. If the | organization did no | ot check a box on i | line 13 or 16a, and | line 15 is 33 1/3% | 6 or more, check t | his box |
| | and eton here. The organization qua | lifies as a publicly s | supported organiz | ation | | | |
| 17 | a 10% -facts-and-circumstances tes | st - 2018. If the org | anization did not o | check a box on line | 13, 16a, or 16b, | and line 14 is 10% | or more, |
| | and if the organization meets the "fa | cts-and-circumstan | ices" test, check t | his box and stop h | ere. Explain in Pa | rt vi now the orga | nization |
| | meets the "facts and circumstances" | ' test. The organiza | ation qualifies as a | publicly supported | l organization | | → L |
| | b 10% -facts-and-circumstances tes | st - 2017. If the org | anization did not o | check a box on line | 13, 16a, 16b, or | 1/a, and line 15 is | |
| | more, and if the organization meets t | he "facts-and-circu | umstances" test, c | heck this box and | stop here. Explai | n in Part VI how th | • ▶ □ |
| | organization meets the "facts and cir | cumstances" test. | The organization | qualifies as a public | ciy supported org | anization | |
| 18 | Private foundation. If the organization | on did not check a | box on line 13, 16 | a, 16b, 17a, or 17b | , CHECK THIS DOX a | and see instructio | |

Schedule A (Form 990 or 990-EZ) 2018 OF LAW FOUNDATION, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(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.)

| 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 | Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| | Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | · · · · | <u> </u> |
| 78 | Amounts included on lines 1, 2, and | | | | | | |
| ł | 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the creater of \$5,000 or 1% of the | · · · | | | | | |
| | amount on line 13 for the year | | | | | | |
| (| c Add lines 7a and 7b | | | <u> </u> | | <u> </u> | <u> </u> |
| | Public support. (Subtract line 7c from line 6.) ction B. Total Support | | | | | <u> </u> | <u></u> |
| _ | endar year (or fiscal year beginning in) | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 9 | Amounts from line 6 a Gross income from interest, dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, and income from similar sources | | | | | | |
| I | b Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | c Add lines 10a and 10b | | | | | <u> </u> | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | · . | | | | | |
| | 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.) First five years. If the Form 990 is for | | in first second 4 | ird fourth or fifth | tax year as a secti | on 501(c)(3) organ | ization, |
| 14 | | or the organization | s inst, second, u | | | | |
| 6 | check this box and stop here | lic Support P | ercentage | | | | |
| <u> </u> | Public support percentage for 2018 | (line 8 column (f) | divided by line 13 | column (f) | | 15 | % |
| | | | | | | 16 | % |
| <u>16</u> | ection D. Computation of Inve | stment Incon | | | | | |
| | Investment income percentage for 2 | | | |)) | 17 | % |
| 40 | Investment income percentage from | 2017 Schedule A | Part III, line 17 | | | 18 | % |
| 19 | a 33 1/3% support tests - 2018. If the | e organization did | not check the bo | x on line 14, and li | ne 15 is more than | 33 1/3%, and line | 17 is not |
| | more than 33 1/3%, check this box | and stop here. The | e organization qua | alifies as a publicly | supported organi | zation | |
| | b 33 1/3% support tests - 2017. If the | e organization did | not check a box | on line 14 or line 19 | 9a, and line 16 is n | nore than 33 1/3% | , and |
| | line 18 is not more than 33 1/3%, ch | eck this box and | stop here. The org | ganization qualifies | s as a publicly supp | ported organization | |
| | | | | the erith check | this hoy and see i | nsmicii005 | |

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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| Sche | dule A (Form 990 or 990-EZ) 2018 OF LAW FOUNDATION, INC. | 11-32 | 3534 | / Pa | ige 4 |
| | t 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.) | | | | |
| 200 | tion A. All Supporting Organizations | | | | |
| sec | | | | Yes | No |
| | Are all of the organization's supported organizations listed by name in the organization's governing | | | | |
| 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 | | | | |
| | | | 1 | | |
| | 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). | | 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. | | 3a | | |
| 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. | | 3b | | |
| | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) | | | | |
| C | purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | | 3c | | |
| 4. | Was any supported organization not organized in the United States ("foreign supported organization")? If | | | | |
| ła | | | 4a | | |
| | "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 | | 41 | | |
| | despite being controlled or supervised by or in connection with its supported organizations. | | 4b | | |
| С | 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. | | 4c | | |
| 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). | | 5a | | |
| | Type I or Type II only. Was any added or substituted supported organization part of a class already | | | | |
| D | | | 5b | | |
| | designated in the organization's organizing document? | | 5c | | |
| 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. | | 6 | | |
| 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). | | 7 | | |
| 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). | | 8 | | |
| 0- | Was the organization controlled directly or indirectly at any time during the tax year by one or more | | | | |
| 3 a | disqualified persons as defined in section 4946 (other than foundation managers and organizations described | | | | |
| | | | 9a | | |
| | in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | | | | 1 |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which | | 9b | | [- |
| | the supporting organization had an interest? If "Yes," provide detail in Part VI. | | | | ┢ |
| С | 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. | | 90 | | ┢ |
| l0a | Was the organization subject to the excess business holdings rules of section 4943 because of section | | | | Ł |
| | 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated | | | | - |
| | supporting organizations)? If "Yes," answer 10b below. | | 10a | | ⊢ |
| b | the term of the term of the term of the term of the Schodule C. Form 4720 to | | | | |
| - | determine whether the organization had excess business holdings.) | | 10b | | |

determine whether the organization had excess business holdings.)

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| Sche | | 1114 | J Pa | ige 5 |
| Par | t IV Supporting Organizations (continued) | | | |
| | · · · · · | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | l | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | <u>11a</u> | <u> </u> | <u> </u> |
| b | A family member of a person described in (a) above? | 11b_ | | |
| с | 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_ | | L |
| Sec | tion 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 | L | |
| 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, | | <u> </u> | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sec | tion 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 | | |
| Sec | tion D. All Type III Supporting Organizations | | | |
| 000 | | | Yes | No |
| | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | | |
| 1 | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | 1 | |
| | 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 | 1 | 1 |
| ~ | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| 2 | 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 | | |
| · • | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organization's have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | · | 1 1 |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | 3 | · | · · · · · · · · · · · · · · · · · · · |
| | supported organizations played in this regard. | | <u> </u> | |
| _ | tion E. Type III Functionally Integrated Supporting Organizations | <u> </u> | ······ | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instructions | <i>.</i> | | |
| 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. | truction | | |
| С | | aucaon | Yes | No |
| 2 | Activities Test. Answer (a) and (b) below. | r | 163 | |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | 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 | | | ~ ~~~~ |
| | activities but for the organization's involvement. | <u>2b</u> | | ╉─── |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | 1 |
| а | • | | - | - |
| | trustees of each of the supported organizations? Provide details in Part VI. | <u>3a</u> | | — |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

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| Sche | dule A (Form 990 or 990 EZ) 2018 OF LAW FOUNDATION, INC. | | | <u>1-3235349 Page 6</u> |
|------|---|------------|--------------------------------|---------------------------------|
| Pa | | g Orga | nizations | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | g trust or | n Nov. 20, 1970 (explain in | Part VI.) See instructions. All |
| • | other Type III non-functionally integrated supporting organizations must co | mplete S | Sections A through E. | |
| Sect | ion A - Adjusted Net Income | : | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | <u> </u> |
| 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 | · | |
| Sect | ion 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 | | |
| | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | 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 | | |
| Sec | tion 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) | 6 | · | <u> </u> |
| | | | start Turce III europeining or | nonination (and |

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

Schedule A (Form 990 or 990 EZ) 2018 OF LAW FOUNDATION, INC. 11-3235349 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2018 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 (iii) (i) (ii) Distributable Underdistributions **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2018 Amount for 2018 1 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reason-2 able cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2018 a From 2013 b From 2014 c From 2015 d From 2016 e From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount Carryover from 2013 not applied (see instructions) i Remainder. Subtract lines 3g, 3h, and 3i from 3f. i 4 Distributions for 2018 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2018 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2018, if 5 any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2018. Subtract lines 3h 6 and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2019. Add lines 3j and 4c. Breakdown of line 7: 8 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

| Sobodulo A | (Form 990 or 990 EZ) 2018 OF LAW FOUNDATION, INC. | 11-32 | 35349 | Page 8 |
|------------|---|-----------|-------------|---------------|
| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 1 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 a 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 D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.) | Section B | line 1e: Pá | ı C, rt V, |
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| CHEDUL | E D Supplemental Financial Stateme Complete if the organization answered "Yes" on Form | nts 990, | омв No. 1545-0047 2018 |
|-----------------------|---|-------------------------|--|
| epartment of the Trea | ► Complete if the organization answered "Yes" on Form Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, c ► Attach to Form 990. | or 12b. | Open to Public |
| ternal Revenue Servi | Go to www.irs.gov/Form990 for instructions and the latest in | tormation. | |
| lame of the org | anization THE CITY UNIVERSITY OF NEW YORK SCHOO OF LAW FOUNDATION, INC. | | oyer identification numb 11-3235349 |
| Part I Or | ganizations Maintaining Donor Advised Funds or Other Similar Fu | inds or Accour | |
| | anization answered "Yes" on Form 990, Part IV, line 6. | | |
| 0/gi | (a) Donor advised funds | (b) Fund | s and other accounts |
| 1 Total numb | er at end of year | | |
| | value of contributions to (during year) | | |
| 00 0 | value of grants from (during year) | | |
| | value at end of year | | |
| | anization inform all donors and donor advisors in writing that the assets held in donor | | |
| | anization's property, subject to the organization's exclusive legal control? | | Ves |
| 6 Did the org | anization inform all grantees, donors, and donor advisors in writing that grant funds ca | in be used only | |
| | ble purposes and not for the benefit of the donor or donor advisor, or for any other pur | | |
| impermiss | ble private benefit? | 000 Dert IV line 7 | <u>Yes</u> |
| | nservation Easements. Complete if the organization answered "Yes" on Form 9 | 990, Part IV, inte 7. | |
| | of conservation easements held by the organization (check all that apply). | a historically import | ant land area |
| | | a certified historic st | |
| | ection of natural habitat Low Preservation of a ervation of open space | | |
| | ines 2a through 2d if the organization held a qualified conservation contribution in the | form of a conservat | ion easement on the las |
| day of the | | | Held at the End of the Tax |
| • | per of conservation easements | 2a | |
| | age restricted by conservation easements | | |
| | conservation easements on a certified historic structure included in (a) | | |
| | conservation easements included in (c) acquired after 7/25/06, and not on a historic s | | |
| | e National Register | | |
| 3 Number of | conservation easements modified, transferred, released, extinguished, or terminated t | by the organization | during the tax |
| year 🕨 🔄 | | | |
| | states where property subject to conservation easement is located | <u>—</u> , | |
| | rganization have a written policy regarding the periodic monitoring, inspection, handlin | | Yes |
| violations, | and enforcement of the conservation easements it holds? | | |
| • | rolunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing | Conservation ease | intents during the year |
| | expenses incurred in monitoring, inspecting, handling of violations, and enforcing con- | servation easement | s during the year |
| 7 Amount of \$ | expenses incurred in monitoring, inspecting, naroling of violations, and enforcing com | | |
| | conservation easement reported on line 2(d) above satisfy the requirements of section | n 170(h)(4)(B)(i) | |
| | n 170(h)(4)(B)(ii)? | | Yes 🗌 |
| 9 In Part XIII | , describe how the organization reports conservation easements in its revenue and exp | oense statement, a | nd balance sheet, and |
| include, if | applicable, the text of the footnote to the organization's financial statements that desc | ribes the organizati | on's accounting for |
| conservat | on easements. | | |
| | ganizations Maintaining Collections of Art, Historical Treasures, | or Other Simila | ir Assets. |
| | nplete if the organization answered "Yes" on Form 990, Part IV, line 8. | | |
| 1a If the orga | nization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue s | statement and bala | nce sneet works of art, |
| | reasures, or other similar assets held for public exhibition, education, or research in fur | inerance of public | Service, provide, in r art |
| | the footnote to its financial statements that describes these items. nization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue state | ement and balance | sheet works of art, histo |
| b if the orga | or other similar assets held for public exhibition, education, or research in furtherance | of public service, p | rovide the following amo |
| | these items: | ,, p | · · · · · · · · · · · · · · · · · · |
| - | ue included on Form 990, Part VIII, line 1 | ▶ \$ | |
| | s included in Form 990, Part X | | |
| | nization received or held works of art, historical treasures, or other similar assets for fin | ancial gain, provide | |
| the follow | ng amounts required to be reported under SFAS 116 (ASC 958) relating to these items | s: | |
| | ncluded on Form 990, Part VIII, line 1 | | i |
| a nevenue i | | | |

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| Scho | dule D (Form 990) 2018 OF LAW | FOUNDATION, | INC. | - | | 11-32 | 23534 | 9 _{Pa} | age 2 |
|-------------------------------|--|---|--|---|--|------------------------------------|----------------------|-----------------|--------------|
| Par | till. Organizations Maintaining C | ollections of Art | , Historical Tre | easures, or | Othe | r Similar Ass | ets(contir | nued) | |
| 3 | Using the organization's acquisition, accession | on, and other records | , check any of the f | ollowing that | are a sig | nificant use of its | s collectio | n item | s |
| Ŭ | (check all that apply): | , | · • | - | - | | | | |
| а | | d | Loan or exch | ange progran | ns | | | | |
| b | Scholarly research | е | | | | | | | |
| c | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's co | lections and explain | how they further th | e organization | n's exem | pt purpose in Pa | rt XIII. | | |
| - - 5 | During the year, did the organization solicit o | receive donations of | f art, historical treas | sures, or other | similar | assets | | | |
| 5 | to be sold to raise funds rather than to be ma | | | | | |] Yes | |] No |
| Par | t IV Escrow and Custodial Arran | aements. Complet | e if the organization | answered "Y | 'es" on l | Form 990, Part IV | , line 9, or | | |
| 1 41 | reported an amount on Form 990, Par | | | • | | | | | |
| 1a | Is the organization an agent, trustee, custodi | | ary for contribution | s or other ass | ets not i | ncluded | | | _ |
| 10 | on Form 990, Part X? | | | | | | Yes | |] No |
| h | If "Yes," explain the arrangement in Part XIII | | | | | | | | |
| 0 | in res, explain the analigement in are sur- | | | | | | Amoun | t | |
| - | Beginning balance | | | | | 1c | | | - |
| | | | | | | | | | |
| | Additions during the year | | | | | | | | |
| e | Distributions during the year | | | | | 1f | | | |
| T | Ending balance Did the organization include an amount on Fe | 000 Bart V lipo (| | etodial accou | nt liabilit | | Yes | | No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | | |] |
| | | Check here if the exp | swered "Yes" on Fo | rm 990 Part I | V line 1 | | | | |
| Fai | rt V Endowment Funds. Complete i | | | (c) Two years | | d) Three years back | (e) Fou | r vears | back |
| | | (a) Current year 2,992,072. | (b) Prior year 2,748,335. | 2,333 | | 2,173,536 | | ,980, | _ |
| 1a | Beginning of year balance | | 157,000. | | ,000. | 260,725 | | 264 | _ |
| ь | Contributions | 15,000. | | | 134. | -38,786 | | -22 | |
| С | Net investment earnings, gains, and losses | 162,693. | 176,880. | | | 62,238 | | | 823 |
| d | Grants or scholarships | 100,238. | 90,143. | . 80 | ,036. | 02,230 | <u> </u> | 40, | 025 |
| е | Other expenditures for facilities | | | | | | | | |
| | and programs | | | | | | | | |
| f | Administrative expenses | | | | | | - | | 526 |
| g | End of year balance | 3,069,527. | 2,992,072. | 2,748 | ,335. | 2,333,237 | · 2 | ,173 | 536 |
| 2 | Provide the estimated percentage of the cur | rent year end balance | e (line 1g, column (a |)) held as: | | | | | |
| а | Board designated or quasi-endowment 🕨 | .00 | _% | | | | | | |
| b | Permanent endowment > 78.04 | % | | | | | | | |
| с | Temporarily restricted endowment 2 | 1.96 % | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100%. | | | | | | | |
| 3a | Are there endowment funds not in the posse | | tion that are held a | nd administer | ed for th | e organization | | | |
| | by: | · | | | | | | Yes | |
| | (i) unrelated organizations | | | | | | 3a(i) | | X |
| | •• | | | | | | | | Х |
| | (ii) related organizations | | | | | | | | |
| F | (ii) related organizations | | | | | | 3b | | |
| | If "Yes" on line 3a(ii), are the related organization | tions listed as require | ed on Schedule R? | | ······································ | ••••••• | [30 | l | |
| 4 | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the | tions listed as require organization's endo | ed on Schedule R? | | ······································ | | [30 | I | |
| 4 | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm | tions listed as require organization's endo nent. | ed on Schedule R? wment funds. | ····· | | | [30 | l | |
| 4 | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm Complete if the organization answere | ations listed as require organization's endor tent. d "Yes" on Form 990 | ed on Schedule R? wment funds. , Part IV, line 11a. S | See Form 990, | Part X, | line 10. | | | e |
| 4 | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot | ed on Schedule R? wment funds. , Part IV, line 11a. S her (b) Cost | Gee Form 990, or other | Part X, (c) Ac | | <u>3b</u> (d) Boo | l ok valu | e |
| 4 Par | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipn Complete if the organization answere Description of property | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot basis (investm | ed on Schedule R? wment funds. , Part IV, line 11a. S her (b) Cost | See Form 990, or other (other) | Part X, (c) Ac dep | line 10. cumulated reciation | | l | e |
| 4 Par | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm Complete if the organization answere Description of property Land | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot basis (investm | ed on Schedule R? wment funds. , Part IV, line 11a. S her (b) Cost | See Form 990, or other (other) | Part X, (c) Ac dep | line 10. cumulated | | k valu | e |
| 4 Pa 1a b | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm Complete if the organization answere Description of property Land Buildings | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot basis (investm | ed on Schedule R? wment funds. , Part IV, line 11a. S her (b) Cost | See Form 990, or other (other) | Part X, (c) Ac dep | line 10. cumulated reciation | | bk valu | e |
| 4 Par 1a b c | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm Complete if the organization answere Description of property Land Buildings Leasehold improvements | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot basis (investm | ed on Schedule R? wment funds. , Part IV, line 11a. S ther (b) Cost nent) basis | see Form 990, or other (other) | Part X, (c) Ac dep | line 10. cumulated reciation | (d) Boo | | |
| 4 Par 1a b c d | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm Complete if the organization answere Description of property Land Buildings Leasehold improvements Equipment | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot basis (investre | ed on Schedule R? wment funds. , Part IV, line 11a. S ther (b) Cost nent) basis | See Form 990, or other (other) | Part X, (c) Ac dep | line 10. cumulated reciation | (d) Boo | 9 , 4 | |
| 4 Par 1a b c d | If "Yes" on line 3a(ii), are the related organiza Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm Complete if the organization answere Description of property Land Buildings Leasehold improvements | ations listed as require organization's endor nent. d "Yes" on Form 990 (a) Cost or ot basis (investm | ed on Schedule R? wment funds. , Part IV, line 11a. S her (b) Cost hent) basis 18 | See Form 990, or other (other) 5 , 517 . | Part X, (c) Ac dep | line 10. cumulated reciation | (d) Boo | | 55. |

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| Schedule D | | DATION, INC | · • | <u> </u> | -3235349 Page 3 |
| Part VII | Investments - Other Securities. | | | | |
| | Complete if the organization answered "Yes" | on Form 990, Part IV, | line 11b. See Form 990, F | Part X, line 12. | |
| (a) Descrip | tion of security or category (including name of security) | (b) Book value | (c) Method of va | Iluation: Cost or end | of-year market value |
| (1) Financia | al derivatives | | | <u> </u> | <u> </u> |
| | held equity interests | | | | <u></u> |
| (3) Other | | | | | |
| (A) | | | | | <u> </u> |
| (B) | | · | | | |
| (C) | | | | | |
| (D) | | | | | |
| (E) | | | | | |
| (F) | | | | | |
| (G) | | | | | · · · · · · · · · · · · · · · · · · · |
| (H) | | | | | |
| | b) must equal Form 990, Part X, col. (B) line 12.) 🕨 | | | | |
| | Investments - Program Related. | | | | |
| | Complete if the organization answered "Yes" | on Form 990, Part IV, | line 11c. See Form 990, F | Part X, line 13. | |
| | (a) Description of investment | (b) Book value | (c) Method of va | aluation: Cost or end | l-of-year market value |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | <u></u> | | | |
| | (b) must equal Form 990, Part X, col. (B) line 13.) 🕨 | | | | |
| Part IX | | | | | |
| | Complete if the organization answered "Yes" | on Form 990, Part IV, | line 11d. See Form 990, | Part X, line 15. | |
| | | Description | | | (b) Book value |
| (1) | | | | | |
| (1) (2) | | | | | |
| | | | | | |
| (3) | | | | | |
| (4) | | | <u></u> | | |
| (5) | · · · · · · · · · · · · · · · · · · · | | ······································ | | |
| <u>(6)</u> | · · · · · · · · · · · · · · · · · · · | | | | |
| (7) | | | | · · _ / | |
| (8) | | | | | |
| (9) Tatal (Cali | umn (b) must equal Form 990, Part X, col. (B) lir | ne 15) | | > | |
| Part X | Other Liabilities. | | | | |
| | Complete if the organization answered "Yes" | on Form 990, Part IV | | n 990, Part X, line 25 F |). |
| 1. | (a) Description of liability | | (b) Book value | | |
| | deral income taxes | | | | |
| (2) DU | UE TO A RELATED PARTY | | 2,196. | | |
| (3) | | | , | | |

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 X Schedule D (Form 990) 2018

2,196.

(4) (5) (6) (7) (8) (9)

2.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

| | dule D (Form 990) 2018 OF LAW FOUNDATION, INC. | | | <u>11-</u> | 3235349 Pag | _{2e} 4 |
|---|--|--|-----------------|----------------------------|--------------------------------------|------------------------------|
| Par | | ents With | n Revenue per R | eturr |) . | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12 | | | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 2,810,80 | 0. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | | |
| a | Net unrealized gains (losses) on investments | 2a | -394,376. | | | |
| b | Donated services and use of facilities | | 491,884. | | | |
| c | Recoveries of prior year grants | | | | | |
| d | Other (Describe in Part XIII.) | | | | | _ |
| e | Add lines 2a through 2d | | | 2e | 97,50 | |
| 3 | Subtract line 2e from line 1 | | | 3 | 2,713,29 | 2. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a . | | | | |
| b | Other (Describe in Part XIII.) | 1 1 | | | • | _ |
| с | Add lines 4a and 4b | | | 4c | | 0. |
| _ | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | 5 | 2,713,29 | 2. |
| 5 | Total revenue. Add lines 5 and 40. (mis must equal tom every tart i more ag | · · · · · · · · · · · · · · · · · · · | | - | | |
| Pa | t XII Reconciliation of Expenses per Audited Financial State | nents Wil | th Expenses per | - | | <u> </u> |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 | nents Wil | h Expenses per | - | rn. | |
| 5 Pa | t XII Reconciliation of Expenses per Audited Financial Stater | nents Wil a. | th Expenses per | - | | |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 | nents Wil a. | th Expenses per | - | rn. | |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements | nents Wil | th Expenses per | - | rn. | |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: | nents Wil a. | th Expenses per | - | rn. | |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities | 2a | th Expenses per | - | rn. | |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses | 2a2b2c2 | th Expenses per | - | rn. 2,340,16 | 3. |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments | 2a 2b 2c 2d | 491,884. | Retu 1 2e | rn. 2,340,16 491,88 | 3. |
| Pa | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) | 2a 2b 2c 2d | 491,884. | Retu | rn. 2,340,16 | 3. |
| Par 1 2 a b c d e | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d | 2a 2b 2c 2d | 491,884. | Retu 1 2e | rn. 2,340,16 491,88 | 3. |
| Par 1 2 a b c d 3 | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b | 2a 2b 2c 2d | 491,884. | Retu 1 2e | rn. 2,340,16 491,88 | 3. |
| Par 1 2 a b c d 3 | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b | 2a 2b 2c 2d | 491,884. | Retu 1 2e | rn. 2,340,16 491,88 | 3. |
| Par 1 2 a b c d e 3 4 a b | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) | 2a 2b 2c 2d 2d | 491,884. | Retu 1 2e 3 4c | m. 2,340,16 491,88 1,848,27 | <u>3.</u> <u>9.</u> 0. |
| Pa 1 2 a b c d e 3 4 a b c 5 | t XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) | 2a 2b 2c 2d 2d | 491,884. | Retu 1 2e 3 | rn. 2,340,16 491,88 | <u>3.</u> <u>9.</u> 0. |

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

INTEREST INCOME GENERATED FROM THE ENDOWMENT IS USED PRIMARILY TO SUPPORT

CUNY LAW STUDENTS - PRINCIPALLY FOR PUBLIC INTEREST SUMMER GRANTS.

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE (THE CODE); THEREFORE, NO PROVISION FOR

INCOME TAXES IS REFLECTED IN THE FINANCIAL STATEMENTS. THE FOUNDATION HAS

BEEN CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION THAT IS NOT A PRIVATE

FOUNDATION UNDER SECTION 509(A) OF THE CODE. THE FOUNDATION PRESENTLY

DISCLOSES OR RECOGNIZES INCOME TAX POSITIONS BASED ON MANAGEMENT'S

ESTIMATE OF WHETHER IT IS REASONABLY POSSIBLE OR PROBABLE THAT A LIABILITY 832054 10-29-18 Schedule D (Form 990) 2018

| art XIII Supplemental In | | | | | | |
|--|---|---|-----------|------------|--|-----------|
| AS BEEN INCURRED | FOR UNRECOGN | IZED INC | OME TAXES | 5. MANAGE | MENT HAS | CONCLUDED |
| HAT THE FOUNDATIO | ON HAS TAKEN | NO UNCER | TAIN TAX | POSITION | S THAT R | EQUIRE |
| DJUSTMENT IN ITS | FINANCIAL SI | ATEMENTS | . U.S. FC | ORMS 990 | FILED BY | THE |
| OUNDATION ARE SU | BJECT TO EXAM | INATION | BY TAXING | AUTHORI | TIES. | |
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| | • | ete if the organizatior Go to www.irs | the organization answered "Yes" on Form 990, Part IV, li Attach to Form 990. Go to www irs gov/Form990 for the latest information. | on Form 990, Paı n 990. · the latest inform | Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. ▶ Go to www irs cov/Form990 for the latest information. | | CD DO Open to Public Inspection |
|---|--|--|--|---|--|---------------------------------------|--|
| ization THE OF I | CITY UNIVERSITY AW FOUNDATION, | -10 AI | YORK SCHOOL | | | | Employer identification number 11-3235349 |
| Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | and Assistance to substantiate the | e amount of the grants | or assistance, the | grantees' eligibility | / for the grants or ass | istance, and the selec | tion Vac X No |
| criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the | stance? | toring the use of grant | use of grant funds in the United States. | l States. | | | |
| E | Domestic Organi | zations and Domestic | c Governments. C | omplete if the orge | anization answered "Y | es" on Form 990, Par | t IV, line 21, for any |
| 1 (a) Name and address of organization or government | (b) EIN | (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 assistance | (h) Purpose of grant or assistance |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | • |
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| | | | | | | | |
| Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table | and government of as listed in the line | rganizations listed in th 1 table | he line 1 table | | | | |

832101 11-02-18

| THE CITY UNIVERSI Schedule I (Form 990) (2018) OF LAW FOUNDATION | TY OF | NEW YORK S | SCHOOL | | 11-3235349 Page 2 |
|---|--------------------------|-----------------------------|---------------------------------------|---|---------------------------------------|
| r Assista | . Complete if the | organization answe | sred "Yes" on Form 9 | 90, Part IV, line 22. | |
| (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 noncash assistance |
| FELLOWSHIPS AND SCHOLARSHIPS | 101 | 383,850. | .0 | | |
| BAR GRANTS | 30 | 166,861. | 0 | | |
| | | | | | |
| | | | | • | |
| | | | | | |
| Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. | uired in Part I, lir | ne 2; Part III, column | (b); and any other a | dditional information. | |
| PART I, LINE 2: | | | | | |
| SCHOLARSHIPS ARE DISTRIBUTED AS A | DIRECT P | PAYMENT TO | THE STUDENT | T. STUDENTS | |
| RECEIVE DIRECT PAYMENTS FOR PUBLIC | · | INTEREST SUMMER GRANTS, | RANTS, WHICH | CH ARE | · |
| INTENDED TO SUPPORT STUDENT'S EXPE | EXPENSES (RE | (RENT, FOOD, | COMMUTING | EXPENSES) | |
| DURING THE TIME THEY WORK AT UNPAID | LD SUMMER | INTERNSHIPS. | THE | ORGANIZATION | |
| DOES NOT MONITOR THE MONIES AFTER | THEY ARE | GIVEN, | HOWEVER THE | LAW SCHOOL | |
| CONFIRMS THAT THE STUDENT HAS SECU | SECURED A PU | PUBLIC INTEREST | REST LEGAL | INTERNSHIP | |
| PLACEMENT AND THE STUDENT SIGNS AN | N AFFIRMATION | TION COMMI | COMMITTING THAT | THAT THEY WILL | |
| WORK AND SUBMIT A FINAL NARRATIVE | GRANT RE | REPORT. | | | |
| | | | | | Schedule I (Form 990) (2018) |

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| 601 | | - 84 | T | | None | ash Contr | ibutions | | | OMB No. 15 | 45-004 | , 7 |
|-------------|-------------------------------|----------|----------|---|---------------------|--|--|------------|---------------|----------------------------------|--------|------------|
| | HEDULE m 990) | . 141 | | Complete if the org | | | | es 29 or | 30. | 20 | 18 | |
| | nent of the Tr Revenue Ser | | | Complete if the org Attach to Form 990 Go to www.irs.gov/ |). | | | | ••• | Open to Inspec | | |
| | | | | THE CITY UNI | | V OF NEW | YORK SCHOOL | <u> </u> | Employer | identificatio | n nun | nber |
| Name | of the org | janizai | tion | OF LAW FOUND | | | IONAL DEMOCE | | | 1-32353 | | |
| Par | | IDOE | of P | Property | MIION, | 11101 | | <u> </u> | | · · · | | |
| Fai | | pes | <u> </u> | | (a) | (b) | (c) | | | (d) | | |
| | | | | | Check if applicable | Number of contributions or items contributed | Noncash contribution amounts reported or Form 990, Part VIII, line | n | | d of determini ontribution an | | ; . |
| 1 | Art - Work | s of a | rt | | | | | | | _, | | <u> </u> |
| 2 | | | | ires | | | | | | | | |
| 3 | Art - Frac | tional i | intere | ests | | | | | | | _ | |
| 4 | Books an | d pub | licatio | ons | | | | | | . <u></u> | | |
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| 6 | Cars and | other | vehic | les | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | ····· | | | |
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| 14 | | | | on contribution - Other | · | | | | _ | | • | |
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| 26 | Other Other | | | ; | | + | | | | • | | |
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| 28 | Other | | | 283 received by the organ | | | contributions | T | | | | |
| 29 | Number | | | zation completed Form 8 | 283 Part IV | Donee Acknowled | lgement 29 | | | | | |
| | for which | i uie o | ryani | zadon completed i onn o | 200,1 4111, | Doneorio | | <u> </u> | | | Yes | No |
| 20- | During th | | r did | the organization receive | by contribut | ion any property re | ported in Part I, lines 1 | through 2 | 28, that it | | | |
| 50 a | must bol | d for a | at lea | st three years from the da | ate of the init | ial contribution, an | d which isn't required to | be used | for | | | |
| | exempt : | | spe fr | or the entire holding perio | d? | | • | | | 30a | | X |
| h | | | | he arrangement in Part II. | | | | | | | | |
| 31 | Does the | orna | nizati | on have a gift acceptance | e policy that | requires the reviev | of any nonstandard co | ntributior | າຣ? | 31 | | X |
| | Does the | orner | nizati | on hire or use third partie | s or related | organizations to so | licit, process, or sell nor | ncash | | | | |
| JEd | contribu | | | | | | ·····, -···· | | | 32a | | X |
| F | If "Yes," | | | | ••••••• | | | | | | | ĺ |
| 33 | If the or | acico | tion | lidn't report an amount in | column (c) f | for a type of prope | ty for which column (a) i | is checke | ed, | | | 1 |
| ~ | describe | | | | | | | | | | | |
| | | | | eduction Act Notice, se | e the Instru | ctions for Form 9 | 90. | | Sch | edule M (Fori | n 990 |) 2018 |

| | | | | THE | CII | U Y | VIVE | RSITY | OF | NEW | YORK | SCHOOL | 11-3235349 | Page 2 |
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| Schedule N Part II | <u>1 (Forn</u> Sur | n 990) Malei | <u>2018</u> | OF . | LAW matio | Prout | vide the | ION , information | on real | • uired by | Part I, line | s 30b, 32b, ar | | ation |
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Schedule M (Form 990) 2018

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| SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service | Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 er 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. So to www.irs.gov/Form990 for the latest information. | OHE No. 1545-0047 2018 Open to Public Inspection | | | |
|--|---|--|--|--|--|
| Name of the organization | THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC. | Employer identification number 11-3235349 | | | |
| FORM 990, PART | VI, SECTION B, LINE 11B: | | | | |

PRIOR TO FILING, THE FORM 990 IS CIRCULATED TO THE MEMBERS OF THE BOARD OF

DIRECTORS, AND THE AUDIT COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS REVISED THE FOUNDATION'S CONFLICT OF INTEREST POLICY TO IN 2018 TO ENSURE ITS COMPLIANCE WITH NEWLY ENACTED NEW YORK STATE LEGISLATION. THE CONFLICT OF INTEREST POLICY IS CIRCULATED AND REVIEWED WITH THE MEMBERS OF THE BOARD OF DIRECTORS AT THE ANNUAL MEETING AND AT SUBSEQUENT MEETING BY THE AUDIT CHAIR; ALL DIRECTORS BOTH VOTING AND EX-OFFICIO, ARE REQUIRED TO FILL OUT THE CONFLICT OF INTEREST FORM, SETTING FORTH ALL POTENTIAL CONFLICTS THAT THEY OR THEIR RELATED PARTIES OR AFFILIATES MIGHT HAVE. THE AUDIT COMMITTEE, WHICH IS MADE UP OF INDEPENDENT DIRECTORS, IS CHARGED WITH MONITORING AND ENFORCEMENT OF THE CONFLICT OF INTEREST POLICY.

| FORM 990, PART VI, SECTION C, LINE 19: |
|---|
| THE FOUNDATION'S CERTIFICATE OF INCORPORATION IS A PUBLIC DOCUMENT, |
| AVAILABLE FROM THE NEW YORK STATE SECRETARY OF STATE. THE BY-LAWS, MINUTES |
| OF BOARD MEETINGS, CONFLICT OF INTEREST POLICY, AND QUARTERLY AND ANNUAL |
| FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST TO CUNY SCHOOL OF LAW. THIS |
| FORM 990 IS A PUBLIC DOCUMENT, AND, AS AN ATTACHMENT TO THE FOUNDATION'S |
| ANNUAL FILING OF FORM CHAR 500, IS AVAILABLE FROM THE NEW YORK STATE OFFICE |
| OF THE ATTORNEY GENERAL, CHARITIES REGISTRY. |

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| Sched | ule O (Form 990 or 9 | 90-EZ) (2018) | | | | | | | | | Page |
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| Name of the organization | | THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC. | | | | | | | Employer identification number 11-3235349 | | |
| THE | OVERSIGHT | & SELECTION | PROCESS | HAS | NOT | CHANGED | FROM | THE | PRIOR | YEAR. | |
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