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DLN: 93493162010080

## Form **990**

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

OMB No 1545-0047

**Open to Public** 

Department of the Treasury Internal Revenue Service

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

A F.	4 1	2000	<u> </u>		04 2000	24 2000		Inspection
			іепааг уеа	r, or tax year beginning 09- C Name of organization	-01-2008 and ending 08-	31-2009	D Employer	identification number
_	eck if ap Iress cha	plicable	Please use IRS	TEACHERS COLLEGE COLUMB	IA UNIVERSITY		13-1624	202
_		-	label or	Doing Business As			E Telephone	
_	ne chan	-	print or type. See				(212) 67	8-3016
Inıt —	ıal retur	'n	Specific Instruc-		ox if mail is not delivered to stre	et address) Room/su	to	eipts \$ 274,433,364
Ter	mınatıoı	n	tions.	525 W 120TH ST BOX 30				,,,
- Am	ended r	eturn		City or town, state or country	, and ZIP + 4	•		
— App	lication	pending		NEW YORK, NY 10027				
		ľ	F Nan	ne and address of Principal	Officer	H(2) To	<b></b>	6
				Y SPECTOR			:his a group reti liates?	Yes V No
				120TH ST BO X 30				
<b>.</b> To:	v ovom	pt status		ORK, NY 10027 (3)◀ (insert no )			all affiliates incl	
Lia	x-exem	pt status	J♥ 501(c)	(1 ( 3 ) ¬ (Insert no )   4947(	a)(1) or   527			ist See instructions )
J W	eb site	e: ► wwv	v tc edu			H(c) Gr	oup Exemption	Number 🟲
			_					
<b>К</b> Тур	e of org	anızatıon	<b>✓</b> Corporat	ion trust association ot	her 🟲	<b>L</b> Year of	Formation 1887	<b>M</b> State of legal domicile NY
Pa	rt I	Sumr	nary					
	1	Briefly d	lescribe th	e organization's mission or	most significant activities	1		
œ.		Teachei	rs College,	Columbia University See S	Schedule O (Form 990), St	upplemental Inforn	nation to Form 9	990 for the College's
Ĕ		mission	and its mo	st significant activities				
Governance								
\$	2	Check t	hıs box 🦵	ıf the organizatıon disconti	nued its operations or disp	osed of more than	25% of its ass	ets
	3	Number	of voting r	nembers of the governing b	ody (Part VI, line 1a) .		. 3	34
ಶ ഗ	4	Number	ofındepen	dent voting members of th	e governing body (Part VI,	line 1 b)	. 4	33
ĕ	5	Total nu	ımber of en	nployees (Part V , line 2a)			5	3,162
ACTIVITIES &	6	Total nu	ımber of vo	lunteers (estimate if neces	sary)		6	130
4	7a	Total gr	oss unrela	ted business revenue from	Part VIII, line 12, column	(C)	7:	-38,285
	ь	Net unre	elated busi	ness taxable income from	Form 990-T, line 34 .	•	7	b -38,285
						Р	rior Year	Current Year
	8	Contril	outions and	d grants (Part VIII, line 1h	)		42,983,770	35,088,394
₫	9			revenue (Part VIII, line 2g		118,300,169		
Revenue	10	-		ne (Part VIII, column (A),			12,550,072	
æ	11			art VIII, column (A), lines			6,932,486	
	12		•	dd lines 8 through 11 (mus		·	0,552,100	3,230,000
		12)	0,011,00	aa iiiico o tiiioagii 11 (iiiao	t oquar r urt v 111, corum	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	180,766,497	158,500,390
	13	Grants	and simila	ar amounts paid (Part IX, c	olumn (A), lines 1–3)		15,953,448	17,842,493
	14	Benefit	s paid to o	r for members (Part IX, co	umn (A), line 4)			0
	15	Salarıe	s, other co	ompensation, employee ber	nefits (Part IX, column (A),	lines 5-		
Expenses		10)					102,201,732	108,321,348
ŧ	16a	Profes	sional fund	raısıng fees (Part IX, colur	nn (A), line 11e)			30,252
ੜੇ	ь	(Total fu	ındraising ex	penses, Part IX, column (D), line	25 6,621,552			
	17	Other	expenses (	Part IX, column (A), lines	11a-11d, 11f-24f)		62,494,050	60,053,558
	18	Totale	xpenses—	add lines 13-17 (must eqi	ual Part IX, line 25, columi	n (A))	180,649,230	186,247,651
	19	Reveni	ue less exp	enses Subtract line 18 fro	om line 12		117,267	
<u>දී</u>						Beair	ning of Year	End of Year
Net Assets or Fund Balances	20	Totals	ssets (Par	t X, line 16)			394,982,146	
9 TE							· · ·	
£ 2	21			Part X, line 26)			174,961,295	
	22			d balances Subtract line 2	1 from line 20		220,020,851	167,102,833
Par	t II		ature Blo					
				rjury, I declare that I have exam				
Plea	se	L. Delle	, it is tide, t	ser, and complete becardio	s. proparer tourer than officer	1	·	parat has any knomenge
Sign		Signa	ature of office	er			<u>10-04-15</u> te	
Here		l'.						
			Or print nam	VP FINANCE & ADMINISTRATION e and title	V			
	Ī	P - ' ·	<u> </u>		Date	Choole of	Dronara-/- DT	IN (See Con Inst.)
		Preparer'		MAYSHARK	Date 2010-06-11	Check if self-	Preparer's PT	IN (See Gen Inst )
Paid		emp						
•	arer's	Firm's na	me (or yours	TEACHERS COLLEGE COLUM	BIA UNIVERSITY		EIN Þ	
Use (	nly		and ZIP + 4	525 W 120TH ST BOX 72			-	
				NEW YORK, NY 100276605			Phone no 🕨	
				31111, 111 1002/000.				

May the IRS discuss this return with the preparer shown above? (See instructions) .

## Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

	Statement of Frogram Service Accomplishments (See the mistractions.)
1	Briefly describe the organization's mission
	Teachers College, Columbia University
2	Did the comment of the desired and comment of the c
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?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$ 76,817,510 including grants of \$ 17,842,493 ) (Revenue \$ 102,365,498 )  INSTRUCTION TEACHERS COLLEGE BRINGS TOGETHER A BREADTH OF ACADEMIC DISCIPLINES UNMATCHED BY ANY OTHER GRADUATE SCHOOL OF EDUCATION
	AND - WITHIN A SINGLE INSTITUTION - FEW OTHER COLLEGES OR UNIVERSITIES OUR NAME NOTWITHSTANDING, THE COLLEGE, FROM ITS INCEPTION HAS
	FOCUSED NOT ONLY ON PRE-K-12 CLASSROOM EDUCATION, BUT ALSO ON ADULT LEARNINGS, LEADERSHIP, HEALTH, PSYCHOLOGY, NUTRITION, MOVEMENT SCIENCES, ART AND MUSIC EDUCATION AND MORE THIS VISION OF EDUCATION WRIT LARGE (TODAY EMBODIED IN 60 A
	Sciences, art and mosic education and more this vision of education writerange (todat embodied in 60 a
4ь	(Code ) (Expenses \$ 38,789,843 including grants of \$ ) (Revenue \$ 7,966,116)
	RESEARCH TRAINING AND PUBLIC SERVICE TC'S CURRENT ANNUAL FUNDED RESEARCH EXPENDITURES ARE IN EXCESS OF \$40 MILLION, WITH MAJOR FUNDING
	PROVIDED BY THE NATIONAL SCIENCE FOUNDATION, THE AMERICAN CANCER SOCIETY, THE UNITED STATES DEPARTMENT OF AGRICULTURE, THE U S DEPARTMENT OF EDUCATION, THE NEW YORK STATE DEPARTMENT OF EDUCATION, THE GATES FOUNDATION, THE LUMINA FOUNDATION, UNICEF, THE GE
	FOUNDATION AND OTHER PUBLIC AND NON-PROFIT INSTITUTIONS TO PLACES A MAJOR EMPHASIS ON PUBLIC AND COMMUNITY
4c	(Code ) (Expenses \$ 19,790,745 including grants of \$ ) (Revenue \$ 18,676,618)
	AUXILIARY ENTERPRISES AUXILIARY ENTERPRISES PROVIDES A CONVENIENT SOURCE OF MEALS AND LODGING FOR STUDENTS THAT ENHANCE THEIR COLLEGE
	EXPERIENCE A MAJOR AUXILIARY ENTERPRISE OF THE COLLEGE IS THE TEACHERS COLLEGE PRESS, ESTABLISHED IN 1904 AS THE BUREAU OF PUBLICATIONS, THE
	PRESS IS ONE OF THE OLDEST AND MOST DISTINGUISHED PUBLISHERS OF EDUCATIONAL MATERIALS IN THE UNITED STATES SINCE 1965, WHEN THE BUREAU OF PUBLICATIONS BECAME THE TEACHERS COLLEGE PRESS, ITS PRIMARY PURPOSE HAS BEEN TO PUBL
	(Code ) (Expenses \$ 13,624,354 including grants of \$ ) (Revenue \$ 120,144)
	ACADEMIC SUPPORT ACADEMIC SUPPORT ENABLES THE TEACHERS COLLEGE TO PROVIDE SUPPORT ACADEMIC SUPPORT ENABLES THE TEACHERS COLLEGE TO
	PROVIDE SUPPORT ACADEMIC SUPPORT ENABLES THE TEACHERS COLLEGE TO PROVIDE SUPPORT ACADEMIC SUPPORT ENABLES THE TEACHERS COLLEGE TO PROVIDE SUPPORT ACADEMIC SUPPORT ENABLES THE TEACHERS COLLEGE TO
	PROVIDE SUPPORT
	(Code ) (Expenses \$ 9,119,639 including grants of \$ ) (Revenue \$ 133,729 )
	STUDENT SERVICES STUDENT SERVICES PROVIDES VARIOUS SERVICES TO STUDENT SERVICES PROVIDES VARIOUS SERVICES TO STUDENT SERVICES PROVIDES
	VARIOUS SERVICES TO STUDENT SERVICES PROVIDES VARIOUS SERVICES TO STUDENT SERVICES PROVIDES VARIOUS SERVICES TO STUDENT SERVICES PROVIDES VARIOUS SERVICES TO
	MUTOOD DEVAICED IO
_	
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 22,743,993 including grants of \$ ) (Revenue \$ 253,873)
10	Total program service expenses \$ 158.142.091 Must equal Part IV Line 25 column (8)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule $A$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		Νο
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

#### Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νο
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pa	Part V Statements Regarding Other IRS F	ilings and Tax Complianc	e				
						Yes	No
1a	a Enter the number reported in Box 3 of Form 1096, a	Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicabl						
			1a	1,602			
ь	<b>b</b> Enter the number of Forms W-2G included in line 1	a <i>Enter -0-</i> if not applicable					
			1b	0			
c	c Did the organization comply with backup withholdin		o vend	dors and reportable	1.	V	
<b>3</b> -	gaming (gambling) winnings to prize winners? .		 i		1c	Yes	
2a	Enter the number of employees reported on Form W Statements filed for the calendar year ending with or	· -					
	return		2a	3,162			
Ь	<b>b</b> If at least one is reported in 2a, did the organizatio						
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 25				2b	Yes	
3a	a Did the organization have unrelated business gross return?	income of \$1,000 or more durin	g the	year covered by this	3a	Yes	
h	<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If</i>	"No " provide an explanation in Sch	edule (		3b	Yes	
4a					30	162	
40	over, a financial account in a foreign country (such				4a	Yes	
L	account)?					162	
b	if Yes, enter the name of the foreign country 2007			S Famaian Pauli au I			
	See the instructions for exceptions and filing require Financial Accounts.	ements for <b>Form ID F 90-22.1,</b> <i>Re</i>	eport o	Foreign Bank and			
5a	a Was the organization a party to a prohibited tax she	elter transaction at any time duri	ng the	tax year?	5a		Νo
Ь	<b>b</b> Did any taxable party notify the organization that it	was or is a party to a prohibited	tax sh	elter transaction?	5b		No
c	c If "Yes," to 5a or 5b, did the organization file Form	3886-T Disclosure by Tax-Exemp	t Entit	v Regarding Prohibited			
_	Tax Shelter Transaction?	· · · · · · · · · · · · · · · · · · · ·	•	• • •	5c		
6a	a Did the organization solicit any contributions that w	vere not tax deductible?			6a		No
ь	<b>b</b> If "Yes," did the organization include with every sol	citation an express statement th	natsuo	ch contributions or gifts			
	were not tax deductible?				6b		
7	,						
а	a Did the organization provide goods or services in e more?	xchange for any quid pro quo con	trıbutı	on of \$75 or	7a		No
b	<b>b</b> If "Yes," did the organization notify the donor of the	value of the goods or services p	rovide	d?	7b		
c	c Did the organization sell, exchange, or otherwise di	spose of tangible personal prope	rty for	which it was required to			
	file Form 8282?				7c		No
d	<b>d</b> If "Yes," indicate the number of Forms 8282 filed d	uring the year	7d				
_	- Did the organization during the year receive any fi	inde directly or indirectly to no	nrom	uuma on a naraanal			
e	e Did the organization, during the year, receive any fubenefit contract?				7e	Yes	
f					7f	Yes	
g	g For all contributions of qualified intellectual propert	y, did the organization file Form 8	8899	as required?	7g		
h	<b>h</b> For contributions of cars, boats, airplanes, and other	er vehicles, did the organization f	ile a F	orm 1098-C as			
	required?				7h		
8							
	supporting organizations. Did the supporting organiz excess business holdings at any time during the	ation, or a fund maintained by a s	spons	oring organization, have	_		l <u>.</u> .
	year?				8		No
9	Section 501(c)(3) and other sponsoring organizations	maıntaınıng donor advısed funds.					
а	a Did the organization make any taxable distributions	under section 4966?			9a		No
b	<b>b</b> Did the organization make a distribution to a donor,	donor advisor, or related person	?.		9b		Νo
10	<b>0</b> Section 501(c)(7) organizations. Enter						
а	a Initiation fees and capital contributions included or	n Part VIII, line 12	10a				
b	<b>b</b> Gross receipts, included on Form 990, Part VIII, li	ne 12, for public use of club	10b				
11							
11	<ul><li>Section 501(c)(12) organizations Enter</li><li>a Gross income from members or shareholders .</li></ul>						
a	a Gross income noin members of stidlefloiders .		11a				
b	<b>b</b> Gross income from other sources (Do not net amou	•	114				
	against amounts due or received from them).		11b				
12a	<b>2a</b> Section 4947(a)(1) non-exempt charitable trusts. Is t	ne organization filing Form 990 ir	ı lıeu d	f Form 1041?	12a		
b	<b>b</b> If "Yes," enter the amount of tax-exempt interest re	eceived or accrued during the	134				
	year		12b				

Section A. Governing Body and Management

10

11

Yes

Νo

## Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . . . . . . Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . . . .

			Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
3	Enter the number of voting members of the governing body 1a 34			
b	Enter the number of voting members that are independent 1b 33			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	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		No
	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
	Does the organization have members or stockholders?	6		Νo
3	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
b	each committee with authority to act on behalf of the governing body?	8b	Yes	
3	Does the organization have local chapters, branches, or affiliates?	9a		Νo
ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

17	List the States	with which a c	conv of thic	Form 990 ic	required to be filed
l/	List the States	with which a c	CODY OF THIS	Form 990 IS	required to be filed

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. I another's website.
  - L9 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization HENRY PERKOWSKI OFFICE OF THE CONTROLLER 525 W 120TH ST BOX 30 NEW YORK, NY 10027 (212) 678-3016

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- \* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

The check this box in the organization and i	·	<b>(C)</b> Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

#### Part VII Continued

			tion that a		all			(E)	(F)
(A) Name and Title	(B) Average hours per week	(B) Average hours per week   The per	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations					
			1						
			1			$\vdash$			
			1						
			-			$\vdash$			
						$\vdash$			
1b Total						<b>&gt;</b>	3,704,098		440,755

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶158

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule J for such individual	3	Yes	
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
JT MEGAN & COMPANY INC 44 W 28TH ST FL 11 NEW YORK, NY 10001	Construction Services	2,491,763
STRUCTURETONE 770 BROADWAY NEW YORK, NY 10003	Construction Services	1,019,858
HUGHES HUBBARD & REED  1 BATTERY PARK PLZ NEW YORK, NY 10036	Legal Services	882,739
CVM CONSTRUCTION MANAGERS INC 400 CRESSON BOULEVARD SUITE 300 OAKS, PA 19456	Construction Services	876,876
ARAMARK CORPORATION 8000 UTOPIA PARKWAY JAMAICA, NY 11439	Facility & Engineering Services	718,476
Total number of independent contractors (including those in 1) who refrom the organization	. ,	52

Statement of Revenue

					<b>(A)</b> Total Revenue	(B) Related or Exempt	(C) Unrelated Business	(D) Revenue Excluded from
						Function Revenue	Revenue	Tax under IRC 512, 513, or 514
60 (B	1a	Federated can	npaigns 1a					
世代	b	Membership d	ues					
s, gra	С	Fundraising ev						
# <u></u>	d	Related organ	ızatıons1d					
is, gil imilar	e	Government gran	nts (contributions) <b>1e</b>	11,261,542				
ution Rer si	f	All other contribut	tions, gifts, grants, and not included above	23,826,852				
Contributions, gifts, grants and other similar amounts	g		1f ributions included in					
	h		es 1a-1f)		35,088,394			
				Business Code				
Program Service Revenue	2a	Tuition and fees		900,099	102,430,384	102,430,384		
	ь	Auxiliary activity		900,099	12,808,231	12,808,231		
	с	Fees & contracts	from gov agencies	900,099	7,966,116	7,966,116		
rwc	d	Subscriptions & s	pecial collections	611,710	534,872	534,872		
33	e	Curnculum Devel	opment	611,710	296,192	296,192		
gran	f	All other prog	ram service revenue		312,233	312,233		
£	g	Total. Add line  ▶ \$ 124,348,0	es 2a-2f					
	3		come (including divi	dends, interest				
			amounts)		3,845,111		-38,285	3,883,396
	4	Income from inve	estment of tax-exempt be	ond proceeds	37,284			37,284
	5	Royalties .			156,388			156,388
			(ı) Real	(II) Personal				
	6a	Gross Rents	228,406					
	b	Less rental expenses	94,387					
	с	Rental income or (loss)	134,019		124.010			134.010
	d	Net rental inco	ome or (loss)	▶	134,019			134,019
	7a	Gross amount	(ı) Securities 104,202,384	(II) O ther				
		from sales of assets other than inventory						
	ь	Less cost or other basis and	114,177,411					
	c	sales expenses Gaın or (loss)	-9,975,027					
	d	Net gain or (lo		<b>.</b>	-9,975,027			-9,975,027
	8a	Gross income	from fundraising					
ψ		events (not including  \$ of contributions reported on line 1c) See Part IV, line 18  Attach Schedule G if total exceeds						
Other Revenue								
æ	_	, ,	a					
ther	b c		xpensesb (loss) from fundrais	ing events				
0	9a	Gross income	from gaming	<u>-</u>				
		activities See Complete Scher exceeds \$15,00						
		, , , ,	а					
	b c		xpensesb	activities				
				rctivities ▶				
	10a	returns and al						
	ь	less scat of	a goods sold b	5,914,261				
	c		(loss) from sales of	1,661,176 Inventory►	4,253,085			4,253,085
		Miscellaneou		Business Code	· •			
	11a	Bankruptcy pr (Investments)		900,099	140,619			140,619
	b	Pool revenue		713,940	68,299			68,299
	c	A cademic Cor	mputing Fees	611,710	45,924			45,924
	d	All other reve			358,266			358,266
	e	Total. Add line						
	12	Tatal Para	A A A A L	\$ 613,108	158,500,390	124,348,028	-38,285	-897,747
	12	8c,	. Add lines 1h, 2g, 3		130,300,330	127,070,020	30,203	057,747

#### Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgonizations must complete column (A) but are not re	anizations mu equired to com	ıst complete plete columns (	all columns. (B), (C), and (D)	
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	0		· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in the U S See Part IV, line 22	17,842,493	17,842,493		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,503,944	792,088	1,032,106	679,750
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	76,804,149	66,181,787	0	2,495,790
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	10,169,859	8,330,380	1,405,613	433,866
9	Other employee benefits	13,189,532	11,320,466	1,490,174	378,892
10	Payroll taxes	5,653,864	4,786,208	646,035	221,621
11	Fees for services (non-employees)				
а	Management	89,522	0	74,283	15,239
b	Legal	2,553,620	836,511	1,716,309	800
С	Accounting	263,593	6,313	257,280	0
d	Lobbying	160,958	160,958	0	0
e	Professional fundraising See Part IV, line 17	30,252			30,252
f	Investment management fees	2,319,511	0	2,319,511	0
g	Other	15,316,163	13,662,813	1,170,498	482,852
12	Advertising and promotion	1,003,092	970,887	2,708	29,497
13	Office expenses	4,615,001	3,077,992	916,682	620,327
14	Information technology	2,402,791	1,272,034	701,954	428,803
15	Royalties	347,285	13,665	333,371	249
16	Occupancy	6,281,995	5,729,309	478,830	73,856
17	Travel	2,501,212	2,201,849	175,799	123,564
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	1,340,134	1,152,735	20,863	166,536
20	Interest	4,046,545	3,820,441	187,609	38,495
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,343,432	8,758,196	496,988	88,248
23	Insurance	782,781	15,661	763,907	3,213
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Printing and publications	992,378	887,515	21,536	83,327
ь	Repairs & Maintenance	2,059,696	1,729,318	297,477	32,901
c	Honorariums & Awards	882,218	861,996	11,347	8,875
d	Allocation of indirect cost center expenses	-400,033	1,038,447	-1,535,923	97,443
e	Payments on libor swap	2,073,053	1,957,219	96,113	19,721
f	All other expenses	1,078,611	734,810	276,366	67,435
25	Total functional expenses. Add lines 1 through 24f	186,247,651	158,142,091	21,484,008	6,621,552
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Dart V	Balance	Shoot
Part X	Balance	Sheet

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				beginning or year	1	Lild of year
	2	Savings and temporary cash investments		5,172,440		11,049,332		
	3	Pledges and grants receivable, net	14,859,422		9,303,767			
	4	Accounts receivable, net	•	•		3,417,178	<del>-</del>	4,676,846
	5	Receivables from current and former officers, directors, trustee	· ·	· omr	· · · ·	3,417,170		4,070,040
		other related parties Complete Part II of Schedule L		•			5	
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of					6	
	7	Notes and loans receivable, net				2,987,920	7	2,840,562
	8	Inventories for sale or use				1,377,666	8	1,309,957
\$	9	Prepaid expenses and deferred charges				1,505,536	9	2,641,830
ssets	10a	Land, buildings, and equipment cost basis	-مدا	ı	235,053,781			
⋖			10a		233,033,781	-		
	b	Less accumulated depreciation Complete Part VI of Schedule D	10ь		112,329,244	123,723,862	10c	122,724,537
	11	Investments—publicly traded securities				155,812,936	11	129,657,765
	12	Investments—other securities See Part IV, line 11 Complete F Schedule D	Part VI.	I of		83,720,787	12	73,361,323
	13	Investments—program-related See Part IV, line 11 Complete R						
		of Schedule D			13			
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	2,404,399	15	8,173,998			
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)				394,982,146	16	365,739,917
	17	Accounts payable and accrued expenses .				20,898,483	17	20,668,544
	18	Grants payable			18			
	19	Deferred revenue		23,811,166	19	24,010,832		
	20	Tax-exempt bond liabilities				36,305,000	20	87,097,882
<u>, o</u>	21	Escrow account liability Complete Part IV of Schedule D				550,294	21	492,069
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ei.		persons Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties	1,080,066	23	636,635			
	24	Unsecured notes and loans payable				44,575,000	24	
	25	Other liabilities Complete Part X of Schedule D		47,741,286	25	65,731,122		
	26	Total liabilities. Add lines 17 through 25	174,961,295	26	198,637,084			
		Organizations that follow SFAS 117, check here 🕨 🗸 and comp	plet e l	ines	27			
ф		through 29, and lines 33 and 34.						
Balance	27	Unrestricted net assets				132,810,809	27	81,976,664
<u>ස</u>	28	Temporarily restricted net assets				12,769,700	28	9,579,056
됟	29	Permanently restricted net assets		74,440,342	29	75,547,113		
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ are lines 30 through 34.	e					
S Of	30	Capital stock or trust principal, or current funds		30				
ě	31	Paid-in or capital surplus, or land, building or equipment fund		31				
Assets	32	Retained earnings, endowment, accumulated income, or other fu		32				
Net /	33	Total net assets or fund balances		220,020,851	33	167,102,833		
Ż	34	Total liabilities and net assets/fund balances		394,982,146		365,739,917		
Pa	rt XI	Financial Statements and Reporting						

Dawl VI	Financial	Statements		Danastina
yarır XI	- Financiai	Statements	ana	Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

#### DLN: 93493162010080

Employer identification number

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

ΓEAC	HERS C	OLLEGE COLUM	BIA UNIVERSITY									
									-1624202			
	rt I			harity Status (to be con					Instruct	ions)		
	organı		•	ation because it is (Please								
1	<u> </u>	A church, convention of churches, or association of churches described in <b>Section 170(b)(1)(A)(i).</b>										
2	<u> </u>	A school de	escribed in <b>Sect</b>	: <b>ion 170(b)(1)(A)(ii).</b> (Attac	ch Schedu	ıle E)						
3		A hospital	or a cooperative	e hospital service organizati	on descri	bed in <b>Sec</b>	t ion 170(l	b)(1)(A)(i	ii). (Attac	h Schedu	le H )	
4		A medical i	research organı	zation operated in conjuncti	on with a	hospital d	escribed i	n <b>Section</b>	170(b)(1)	(A)(iii). E	nter the	
			name, city, and									
5	Г	An organiza	atıon operated f	or the benefit of a college or	universit	y owned o	r operated	l by a gove	ernmental	unıt desc	rıbed ın	
		Section 170	D(b)(1)(A)(iv).	(Complete Part II )								
6	Γ	A federal, s	tate, or local go	overnment or governmental	unıt desci	rıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).			
7	Γ	An organiza	ation that norma	ally receives a substantial p	art of its	support fro	m a gove	rnmental u	ınıt or fron	n the gene	eral public	
		described i	n Section 170(b	o)(1)(A)(vi) (Complete Par	tII)							
8	Γ	A communi	ity trust describ	ed in <b>Section 170(b)(1)(A)</b>	(vi) (Com	nplete Par	tII)					
9	Г	An organiza	ation that norma	ally receives (1) more than	331/3% 0	of its supp	ort from c	ontributior	ıs, membe	rship fees	s, and gross	
		receipts fro	om activities rel	ated to its exempt functions	s—s ubject	to certair	n exceptio	ns, and (2	) no more	than 331/	/3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 tax	() from bu	sinesses	
		acquired by	the organization	on after June 30, 1975 See	Section 5	i09(a)(2).	(Complet	e Part III	)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ction 509	( <b>a)(4).</b> (Se	e instruc	tions )	
11	Γ	An organiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purposes of	
				orted organizations describe						Section 5	<b>09(a)(3).</b> Check	
		_		type of supporting organiza					_			
	_	a	• •			- Function			d		III - Other	
е	ı	•		rtify that the organization is agers and other than one or			•			•	•	
		section 50		agers and other than one or	more pub	iiciy supp	orteu orga	11124110113	aescribeu	ili sectioi	1303(4)(1)01	
f				d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supportin	ng organization,	
		check this									Г	
g		Since Augu following pe		as the organization accepted	d any gift	or contrib	ution from	any of the	!			
				r indirectly controls, either a	alone or to	oaether wi	th persons	describe	d in (ii)		Yes No	
			•	ng body of the the supported		-			()	11g	-	
			· -	erson described in (i) above	_					11g(		
		• •	•	ty of a person described in (		hove?				11g(		
h		. ,		nation about the organizatio			sunnorts			1-9(	/	
•				nation about the organization		gamzaron	очррония					
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did v	ou notify	(vi) I	s the	(vii) A mount of	
	Supp	orted	. ,	(described on lines 1-9	organiz	ation in	the orga	nızatıon	organiz	atıon ın	support?	
	Organ	nization		above or IRC section		listed in		i) of your	col (i) o			
				(See Instructions))		verning	supp	oort?	in the	US?		
document?						Yes	No	Yes No		$\overline{}$		
Yes No					162	140	162	No				
						<del> </del>		<del> </del>				
						1		-				
								-				

Total

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	<b>(f)</b> Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	ınclude any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on						ľ	
_	its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
4	Total. Add line 1-3							
	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column						ľ	
	· (f)							
6	Public Support subtract line 5 from line							
	4							`
	otal Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	<b>(c)</b> 2006	( <b>d)</b> 2007	(e)	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							(
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business						ľ	
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in						ľ	
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instruction	ns )		•	12		
13	First Five Years. If the Form 990 is for the			d fourth or fifth	tav vaaras a 5	$\Box$	3 /	
13	organization, check this box and <b>stop here</b>		irst, second, tilli	u, iouitii, oi iiiti	itax year as a s	01(0)(	ر د	<b>▶</b> □
	organization, eneck this box and stop here							- 1
Co	omputation of Public Support Perc	entage						
	Public Support Percentage for 2008 (line 6		ded by line 11 co	olumn (f))		14		
15								
	a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more,						thic box	
10a	and <b>stop here.</b> The organization qualifies as				3 1/3% OF HIGHE,	CHECK	LIIIS DOX	<b>▶</b> □
b	33 1/3% Test - 2007. If the organization di				15 is 33 1/3% c	r more	check th	
_	box and <b>stop here.</b> The organization qualifi			•	13 13 33 1/3/0 0	1 111010	CHOCK C	
17a	10% Facts and Circumstances Test - 2008.				.3, 16a, or 16b	and line	14 is 10	•
	more, and if the organization meets the "fa-	•						
	organization meets the "facts and circums		· ·					<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.	If the organizati	on did not check	a box on line 1	.3, 16a, 16b, or	17a an	id line 15	
	more, and if the organization meets the "fa							
	the organization meets the "facts and circu							ր ▶ [
18	<b>Private Foundation.</b> If the organization did	not check the b	ox on line 13, 10	5a, 16b, 17a or	17b, check this	box ar	ıd see	. —
	ınstructions							▶┌

#### Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's taxexempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total Add lines 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Total of lines 7a and 7b Public Support (Substract line 7c from line 6) **Total Support (e)** 2008 **(b)** 2005 (d) 2007 Calendar year (or fiscal year beginning in) (a) 2004 (c) 2006 (f) Total 9 Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss 12 from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here **Computation of Public Support Percentage** 15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f)) 15 0 % Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g 16 **Computation of Investment Income Percentage** Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f)) 17 **17** 0 % 18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h 19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)						
	Facts and Circumstances Test						

Schedule A (Form 990 or 990-EZ) 2008

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

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

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

		s," to Form 990, Part IV, Line 4, o		,	•
	` ,` ,	t have filed Form 5768 (election unde t have NOT filed Form 5768 (election	` ''	•	•
		s," to Form 990, Part IV, Line 5 (P		(II)) Complete Part IFB Do I	iot complete Part II-A
	ection 501(c)(4), (5), or (6) organi	·			
	ime of the organization			Employer iden	itification number
1 = /	ACHERS COLLEGE COLUMBIA UNIVERSIT	Y		13-1624202	
Par	t I-A To be completed b	y all organizations exempt	under section		527
	organizations. (Se	e the instructions for Schedule	C for details.)		
1	Provide a description of the org	ganızatıon's dırect and ındırect polit	ıcal campaıgn act	civities in Part IV	
2	Political expenditures				\$
3	V olunteer hours				
Pai	for Schedule C for de	y all organizations exempt etails.)	under section	n 501(c)(3). (See the	instructions 
1	Enter the amount of any excise	e tax incurred by the organization ur	ider section 4955	5	\$
2	Enter the amount of any excise	e tax incurred by organization manag	gers under sectio	n 4955	\$
3	If the organization incurred in a	a section 4955 tax, did it file Form 4	1720 for this year	-?	┌ Yes ┌ No
4a	Was a correction made?	┌ Yes ┌ No			
b	If "Yes," describe in Part IV				
Pai		y all organizations exempt for Schedule C for details.)	under section	n 501(c), except sect	tion 501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exemp	ot function activities	\$
2	Enter the amount of the filing o 527 exempt funtion activities	rganızatıon's ınternal funds contrıbı	ıted to other orga	nızatıons for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	mpt function expenditures Add line	s 1 and 2 and ent	er here and on Form	 \$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			☐ Yes ☐ No
5	were made Enter the amount p political contributions received	nd Employer Identification Number ( paid and indicate if the amount was p d and promptly and directly delivere action committee (PAC) If additiona	baid from the filing d to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political

Р		organizations exempt under section 501(ction 501(to)). (See the instructions for Schedule		<b>'68</b>
	Check If the filing organization	belongs to an affiliated group checked box A and "limited control" provisions apply	,	
		bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)	160,958	
c	Total lobbying expenditures (add line	es 1a and 1b)	160,958	
d	Other exempt purpose expenditures		167,585,865	
e	Total exempt purpose expenditures	(add lines 1c and 1d)	167,746,823	
f	Lobbying nontaxable amount Entert columns—	he amount from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:  Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (ente	r 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a Enter -	0- ıf lıne g ıs more than lıne a		
i	Subtract line 1f from line 1c Enter -	0- ıflıne fıs more than lıne c		
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	1 4720 reporting	┌ Yes ┌ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

	Lobbying Expe	nditures During	4-Year Avera	aging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	<b>(e)</b> Total
	Lobbying non-taxable amount			1,000,000	1,000,000	2,000,000
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					3,000,000
c	Total lobbying expenditures			124,791	160,958	285,749
d	Grassroots non-taxable amount					
е 	Grassroots ceiling amount (150% of line d, column (e))					
f	Grassroots lobbying expenditures					

	<b>5768 (election under section 501(h)).</b> (See the instructions for Schedule C for d					
		(a	1)		(b)	
	·	Yes	No	A	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of Volunteers?					
ь				1		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i	Other activities If "Yes," describe in Part IV					
j	Total lines 1c through					
<b>-</b>	1) Did the patientias in line 1 agree the arrangements in the net decombed in section FO1/a)/2)2		Ī	1		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes" enter the amount of any tax incurred under section 4912			+		
	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	5016		) or	
G.	section 501(c)(6). (See the instructions for Schedule C for details.)		301(		,, 0.	
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), sec					
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.)	OK II	Part	III-A	٠,	
1	Dues, assessments and similar amounts from members	T	1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	F	'			
	expenses for which the section 527(f) tax was paid).					
	Current Year		2a \$			
b	Carryover from last year		2b\$			
c	Total	<u> </u>	2c \$			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3 \$			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?		4 \$			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5 \$			
Pā	Supplemental Information	•				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information	Part II	l-B, line	e 1ı		
	Identifier Return Reference Explanation	on				

Part IV Supplemental Information									
Ident if ier	Return Reference	Explanation							

Schedule C (Form 990 or 990EZ) 2008

### OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

	me of the organization ACHERS COLLEGE COLUMBIA UNIVERSITY		Employer identification number
1 12	CHERO COLLEGE COLONDIA GRIVEROITI		13-1624202
Pä	organizations Maintaining Donor organization answered "Yes" to Form		runds or Accounts. Complete if the
	<u> </u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t		nor advised Yes No
6	Did the organization inform all grantees, donors, a		•
	used only for charitable purposes and not for the t impermissible private benefit?	penefit of the donor or donor advisor or othe	r 「Yes 「No
Рa	rt II Conservation Easements. Comple	te if the organization answered "Yes"	to Form 990. Part IV. line 7.
1	Purpose(s) of conservation easements held by the		is term buy, are 11, mile 1.
-	Preservation of land for public use (e.g., recre		n historically importantly land area
	Protection of natural habitat	☐ Preservation of c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a quon the last day of the tax year	ualified conservation contribution in the form	n of a conservation easement
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easeme	ents	2b
c	Number of conservation easements on a certified	l historic structure included in (a)	2c
d	Number of conservation easements included in (	c) acquired after 8/17/06	2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or terminat	ed by the organization during
	the taxable year 🕨	, , , , , , , , , , , , , , , , , , ,	
4	N		
4	Number of states where property subject to conse		
5	Does the organization have a written policy regard enforcement of the conservation easements it hol	- , - , - , - ,	Yes No
6	Staff or volunteer hours devoted to monitoring, ins	pecting and enforcing easements during th	e year 🗠
7	A mount of expenses incurred in monitoring, inspe	cting, and enforcing easements during the y	rear ►\$
8	Does each conservation easement reported on lin 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of se	ction Yes No
9	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the organization's financia	
Pa	Organizations Maintaining Collect Complete if the organization answere	tions of Art, Historical Treasures,	or Other Similar Assets.
1a	If the organization elected, as permitted under SF, art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its	AS 116, not to report in its revenue statem eld for public exhibition, education or reseal	ch in furtherance of public service,
b		AS 116, to report in its revenue statement or public exhibition, education, or research	and balance sheet works of art,
	(i) Revenues included in Form 990, Part VIII, line	e 1	<b>▶</b> \$

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Par	Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>tori</u>	<u>cal Trea</u>	asures, or	Othe	<u>er Simila</u>	r Asse	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofth	e foll	owing tha	t are a signif	ficant u	use of its co	ollectio	n	
а	Public exhibition		d	굣	Loan or	exchange pro	ograms	;			
b	Scholarly research		e	굣	Other E	ducational p	rogram	ns of Colleg	je		
c	✓ Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n hov	v the	/ further t	he organizat	ion's ex	xempt purp	osein		
•	Part XIV	one de la capital			· · · · · · · · · · · · · · · · · · ·	no organizat		.compt parp			
5	During the year, did the organization solicit							nılar	_		<b>-</b>
Doo	assets to be sold to raise funds rather than to trust, Escrow and Custodial A							rand "Var		Yes	No
Pel	Trust, Escrow and Custodial A Part IV, line 9, or reported an an						i alisw	refeu fe	י נט די	פ ווו וט	90,
1a	Is the organization an agent, trustee, custod						ssets	not			_
	ıncluded on Form 990, Part X?								Г	Yes	✓ No
b	If "Yes," explain why in Part XIV and comple	ete the following tabl	e								
									A mou	ınt	
<b>c</b>	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						<b>1</b> f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						굣	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV										
Pa	rt V Endowment Funds. Complete									A Court V	aara Daali
1-	Beginning of year balance	(a)Current Year 209,178,255	(B	<b>)</b> Prior	Year (	(c)Two Years Ba	аск   (а	Inree Years	васк   (е	e)Four Y	ears Back
1a h	Contributions	3,786,332									
Ь	Investment earnings or losses	-18,271,642									
c d	Grants or scholarships	2,350,215									
e	Other expenditures for facilities	10,689,936									
-	and programs	23,232,323									
f	Administrative expenses	164,792									
g	End of year balance	181,488,002									
2	Provide the estimated percentage of the yea	r end balance held a	S								
а	Board designated or quasi-endowment 🕨	31 200 %									
ь	Permanent endowment 🕨 68 800 %										
c	Term endowment ►										
3a	Are there endowment funds not in the posses	ssion of the organiza	ition 1	that a	re held a	nd admınıste	red for	the			
	organization by									Yes	No
	(i) unrelated organizations			•					3a(i)	Yes	<u> </u>
	(ii) related organizations								3a(ii)	Yes	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIV the intended uses of the	·							3b		<u> </u>
	t VI Investments—Land, Building:					Part X lir	ne 10				
					Cost or other	<u> </u>					
	Description of investment				(investme			(c) Depred	iation	( <b>d)</b> Bo	ok value
	Land						692,443	1			692,443
b	Buildings						628,603	1	48,448	11	4,380,155
c	Leasehold improvements					,	· · · · · · · · · · · · · · · · · · ·				-
d	Equipment					39,9	981,225	35,0	80,796		4,900,429
e	Other					2,	751,510				2,751,510
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colum	nn (B)	, lıne	10(c).)	<u> </u>				12	2,724,537
								Sched	lule D (I	Form 9	90) 2008

Investments—Other Securities. See	FORM 990, Part X, line 12	
(a) Description of security or cateory (including name of security)	( <b>b)</b> Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		, , , , , , , , , , , , , , , , , , , ,
Closely-held equity interests		
Other Limited Partnerships-private	22,262,323	F
Other Limited Partnerships-public	51,099,000	F
·	, ,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 ) 🕨	73,361,323	
	- 000 B LV L	12
Part VIII Investments—Program Related. See	e Form 990, Part X, line 1	13. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 ) 🕨		
Part IX Other Assets. See Form 990, Part X, III		
(a) Descrip	tion	(b) Book value
Funds held by bond trustees		8,173,998
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	▶ 8,173,998
Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability	(b) A mount	
Federal Income Taxes		
Accrued pension and other benefit obligations	52,400,950	
U S government grants refundable	2,369,096	
MTM on derivative instrument	9,616,129	
Asset Retirement O bligation	1,344,947	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	65,731,122	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	158,500,390
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	186,247,651
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-27,747,261
4	Net unrealized gains (losses) on investments	4	-10,000,704
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-15,170,053
9	Total adjustments (net) Add lines 4 - 8	9	-25,170,757
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-52,918,018
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial		125,954,398
2	statements	1	
∠ a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-14,139,551
3	Subtract line <b>2e</b> from line <b>1</b>	3	140,093,949
4	A mounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 2,319,511		
b	Other (Describe in Part XIV) 4b 16,086,930		
c	Add lines <b>4a</b> and <b>4b</b>	4c	18,406,441
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	158,500,390
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	178,872,416
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	12,786,769
3	Subtract line <b>2e</b> from line <b>1</b>	3	166,085,647
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,319,511		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	20,162,004
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	186,247,651
	t XIV Supplemental Information		
Con	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	art XIN	/. lines 1b and 2b.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Pt II Line 3		The College has elected not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for the purposes described in detail below in Part III Line 4
Pt III Line 4		THE GOTTESMAN LIBRARIES AT TEACHERS COLLEGE CONTAIN THE WORLD'S LARGEST AND RICHEST COLLECTION OF MATERIALS ON THE EDUCATING PROFESSIONS THE CONTEMPORARY COLLECTIONS ARE CONTINUOUSLY ENHANCED BY AN ACTIVE ACQUISITION PROGRAM JOINTLY PLANNED BY DEPARTMENTAL LIBRARIANS, FACULTY, AND STUDENTS TRADITIONAL PRINT AND NON-PRINT PUBLICATIONS ARE
Pt III Line 4		SUPPLEMENTED BY A RAPIDLY GROWING NUMBER OF VISUAL AND ELECTRONIC FORMATS MANY OF THE HISTORICAL AND ARCHIVAL COLLECTIONS ARE UNAVAILABLE ELSEWHERE AND REPRESENT IN BALANCE, BREADTH, AND DEPTH AN ARCHIVE OF AMERICAN INTELLECTUAL AND SOCIAL HISTORY ELEMENTS OF THESE COLLECTIONS ARE BEING MADE MORE ACCESSIBLE THROUGH ONGOING DIGITIZATION PROJECTS THERE ARE CURRENTLY 430,432 PRINTED VOLUMES AND 237,935 ITEMS IN THE SUBSTANTIAL NON PRINT COLLECTIONS THE LIBRARY COLLECTIONS SUPPORT THE WORK OF FA

### **Schools**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

**SCHEDULE E** 

(Form 990 or 990-EZ)

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Name of the organization TEACHERS COLLEGE COLUMBIA UNIVERSITY Employer identification number

13-1624202

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,			
_	programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain	3	Yes	
	TEACHERS COLLEGE PUBLISHES ITS NONDISCRIMINATORY POLICY IN STUDENT MATERIAL, HANDBOOKS, AND ON ITS WEBSITE THE FOLLOWING STATEMENT IS USED CONTINUING ITS LONG-STANDING POLICY TO SUPPORT ACTIVE EQUALITY FOR ALL PERSONS, TEACHERS COLLEGE DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, CREED, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, ANCESTRY, AGE, MARITAL STATUS, CITIZENSHIP STATUS, VETERAN STATUS, DISABILITY OR ANY OTHER CRITERION SPECIFIED BY FEDERAL, STATE OR LOCAL LAWS, IN THE ADMINISTRATION OF ITS ADMISSIONS, EMPLOYMENT AND EDUCATIONAL POLICIES OR SCHOLARSHIP, LOAN, ATHLETIC AND OTHER SCHOOL-ADMINISTERED PROGRAMS RATHER, TEACHERS COLLEGE AFFIRMS THAT IT ADMITS STUDENTS AND SELECTS EMPLOYEES REGARDLESS OF THEIR RACE, COLOR, RELIGION, CREED, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, ANCESTRY, AGE, MARITAL STATUS, CITIZENSHIP STATUS, VETERAN STATUS, DISABILITY OR ANY OTHER CRITERION SPECIFIED BY FEDERAL, STATE OR LOCAL LAWS AND THEREAFTER ACCORDS THEM ALL THE RIGHTS AND			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis?	4b	Yes	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
_	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		103	
	Does the organization discriminate by race in any way with respect to	_		
а	Students' rights or privileges?	5a		Νο
ь	Admissions policies?	5b		Νo
С	Employment of faculty or administrative staff?	5c		Νο
d	Scholarships or other financial assistance?	5d		Νo
e	Educational policies?	5e		Νo
		<u> </u>		NO.
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
	Other extracurricular activities?	FL		NI *
n	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	5h		Νο
	, , , , , , , , , , , , , , , , , , , ,			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
Ь	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
_	If you answered "Yes" to either 6a or b, please explain using an attached statement			
/	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	_		
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation	7	Yes	

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OMB No 1545-0047

2008

2000

(Form 990)

Department of the Treasury

Internal Revenue Service

SCHEDULE F

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Open to Public Inspection

	ne of the organization					Employer ide	ntification number
TEA	ACHERS COLLEGE COLU	MBIA UNIVERSI	ΤY			13-1624202	>
P	art I General Info	rmation on Ac	tivities Outsi	de the United States	<b>s.</b> Complete		
	"Yes" to Form	990, Part IV, lır	ne 14b.				
1	<del>-</del>	<del>-</del>		ecords to substantiate		_	
	assistance, the grant	ees' eligibility fo	or the grants or	assistance, and the se	lection crite	rıa used to a	ward
	the grants or assistar	nce					✓ Yes
2	<b>For grant makers.</b> Descr United States	ibe in Part IV the	organization's pr	ocedures for monitoring tl	he use of gran	nt funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf adı	ditional space is needed )			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in	ıs a progr describe sp	pecific type of	(f) Total expenditures in
<del></del>	t Asia and Pacific	-		the region) Program Services		s) in region	606 124
∟as	t Asia and Pacific	1	3	Program Services	Foreign Cam	npus	696,124
Eur	ope	0	6	Program Services	LEARNING	PRACTICE	10,396
Sou	ith Asia	0	0	Program Services	Leadership t	training	
Mıd	dle East	0	12	Program Services	Professional	l development	19,588
Eas	t Asia and Pacific	0	0	Program Services	TRAINING,	RESEARCH,	
Sou	ith America	0	1	Program Services	Speech serv	rices	700
Sub	-Saharan Africa	0	2	Program Services	Speech serv	rices	1,575

Totals .

728,383

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							-
	_							_
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		1					
	I			1	1	1	I

Schedule F (Form 990) 2008

		in Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation
Pt I Line 2		The College has no grant funds outside the US
Pt I Line 3 Col (F)		TEACHERS COLLEGE MAINTAINS AN ACCOUNTABLE PLAN AND A SYSTEM OF INTERNAL CONTROLS TO ENSURE THAT ALL EXPENDITURES ARE PROPERLY ACCOUNTED FOR AND ARE RELATED TO A BUSINESS PURPOSE EXPENDITURES ARE PROCESSED BY A CENTRALIZED ACCOUNTS PAYABLE DEPARTMENT THAT VALIDATES BUSINESS PURPOSE, PROPER DOCUMENTATION, AND APPROVAL

**Software ID:** 08000082

**Software Version:** 

**EIN:** 13-1624202

Name: TEACHERS COLLEGE COLUMBIA UNIVERSITY

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
--------------------------	---	------------	-------------------------	------------------------------	------------------------------------	---	--	--

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DLN: 93493162010080

OMB No 1545-0047

Open to Public Inspection

#### **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities**

Department of the Treasury Internal Revenue Service

SCHEDULE G

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization TEACHERS COLLEGE COLUMBIA UNIVERSITY **Employer identification number** 

13-1624202

Part I	Fundraising Activ	vities. Complete if the	organization answered	"Yes" to Form 99	0, Part IV, line 17.
--------	-------------------	-------------------------	-----------------------	------------------	----------------------

- Indicate whether the organization raised funds through any of the following activities Check all that apply
- Mail solicitations
- Email solicitations
- Phone solicitations
- In-person solicitations

- e 🔽 Solicitation of non-government grants
- Solicitation of government grants
- Special fundraising events
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) A ctivity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
GRENZEBACH GLIER & ASSOCIATES INC	Planning/Strategy		Νο		24,252	-24,252
NANCY D'AMBROSIO	Planning/Strategy		No		6,000	-6,000
Total	I .	I				

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

NY,CA,FL

			(a) Event #1	<b>(b)</b> Event #2	(c) O ther Events	(d) Total (Add col (a	a) through
			(event type)	(event type)	(total number)		.c <i>))</i>
IKUE	1	Gross receipts					
Revenue	2	Less Charitable contributions					
	3	Gross revenue (line 1 minus line 2)					
	4	Cash Prizes					
ses	5	Non-cash Prizes					
Expenses	6	Rent/Facility costs					
	7	Other direct expenses					
Direct	8	Direct expense summary Add lin	es 4 through 7 ın columr	n (d)	🛌		
	9	Net income summary Combine III	•				
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	art IV, line 19, or repo	orted more	than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total ga col (a) throu	
<u>~</u>	1	Gross revenue					
98	2	Cash prizes					
pens	3	Non-cash prizes					
Direct Expenses	4	Rent/facility costs					
$\overline{a}$	5	Other direct expenses					
Δ						<del></del>	
<u> </u>	6	Volunteer labor	┌ Yes	┌──Yes <u>%</u> ┌──No	┌ Yes%		
	6 7	Volunteer labor  Direct expense summary Add line	_ No				
<u> </u>	7		s 2 through 5 in column		No ▶		
<u>□</u> 9 a	<b>7</b> <b>8</b> Ent	Direct expense summary Add line	S 2 through 5 in column  abine lines 1 and 7 in column  ation operates gaming ac	(d)	►		Yes No
9	<b>7 8</b> Ent	Direct expense summary Add line  Net gaming income summary Com  ter the state(s) in which the organiza	S 2 through 5 in column  abine lines 1 and 7 in column  ation operates gaming ac	(d)	►		Yes No
9 a b	7 8 Ent Is t If " Wei	Direct expense summary Add line  Net gaming income summary Com  ter the state(s) in which the organization licensed to operate	S 2 through 5 in column bine lines 1 and 7 in column ation operates gaming acgaming acgaming activities in eac	Mo  (d)			Yes No
9 a b	7 8 Ent Is t If " Wet If "	Direct expense summary Add line  Net gaming income summary Com  ter the state(s) in which the organization licensed to operate  No," Explain  re any of the organization's gaming	s 2 through 5 in column  abine lines 1 and 7 in column  ation operates gaming ac gaming activities in eac	(d)	No	· 9a	Yes No

			 <del></del>
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •	-	
	Address •	-	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
c	If "Yes," enter name and address		
	Name Name		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

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DLN: 93493162010080

OMB No 1545-0047

2008

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States  Part II  Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed	Department of the Treasury Internal Revenue Service	Complete	if the organization ans	wered "Yes," on Form 99	90, Part IV, lines 21 or	22. Attach to Form 990.		Open to Public Inspection
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?		LUMBIA UNIVERSIT	Y					fication number
the selection criteria used to award the grants or assistance?	Part I General In	formation on Gra	nts and Assistance	e				
Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed	the selection criteria	used to award the gra	nts or assistance?					<b>▽ Y</b> es 「
organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance	Form 990, P Part IV and	art IV, line 21 for a Schedule I-1 if add	ny recipient that rece itional space is	eived more than \$5,0	00. Check this box	if no one recipient rec	eived more than \$5,	
	organization	of (b) EIN		' '	cash	(book, FMV, appraisal,		(h) Purpose of grant or assistance

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Tuition assistance	3535	17,842,493			

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Pt I Line 2		THE FINANCIAL AID OFFICE REVIEWS STUDENT ELIGIBILITY BASED ON THE CRITERIA SET BY THE US DEPARTMENT OF EDUCATION ON FEDERAL STUDENT AID PROGRAMS STUDENTS ARE NOT AWARDED ANY FEDERAL STUDENT AID IF THE CRITERIA FOR RECEIVING SUCH AID ARE NOT MET ANY CONFLICTS THAT ARISE MUST BE RESOLVED PRIOR TO THE AWARDING OF FUNDS SCHOLARSHIPS ARE AWARDED BASED ON THE CRITERION SET BY THE DONOR EACH WEEK THE REGISTRAR'S OFFICE NOTIFIES FINANCIAL AID OFFICE OF ANY STUDENT(S) WHO HAVE WITHDRAWN FROM CLASSES

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DLN: 93493162010080

**Employer identification number** 

OMB No 1545-0047

**Compensation Information** 

Department of the Treasury Internal Revenue Service

Name of the organization

ın Part III

**Schedule J** 

(Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

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IEA	CHERS COLLEGE COLOMBIA UNIVERSITY			13-1624202			
Dа	rt I Questions Regarding Compensatio	n		13-1624202			
ĿĊ	Questions Regarding compensation					Yes	Νο
1a	Check the appropriate box(es) if the organization pro	ovided a	any of the following to or for a person l	isted in Form		103	"
	990, Part VII, Section A, line 1a Complete Part III						
	First class or charter travel	굣	Housing allowance or residence for	personal use			
	Travel for companions	Γ	Payments for business use of perso	onal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiat	ıon fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chau	ffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "N			ment or	1b		No
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		· · · · · · · · · · · · · · · · · · ·		2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the Compensation committee  Independent compensation consultant Form 990 of other organizations	hat a <u>p</u> p	ly Written employment contract Compensation survey or study				
4	During the year, did any person listed in Form 990,	Part V I	I, Section A, line 1a				
а	Receive a severance payment or change of control [	paymen	it?		4a	Yes	
b	Participate in, or receive payment from, a suppleme	ntal noi	nqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	ompensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide t	he applicable amounts for each item i	n Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.				
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	i, did the organization pay or accrue a	ny			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of			ny			
а	The organization?				6a	Yes	
b	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," (			n-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, I subject to the initial contract exception described in	•	•				

# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		<b>(B)</b> Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
				(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
SUSAN FUHRMAN	(ı) (ıı)	412,330	256,500	73,441	23,000	11,518	776,789	256,50
THO MAS JAMES	(1) (11)	258,088		66,989	23,000	15,442	363,519	
HARVEY SPECTOR	(ı) (ıı)	253,180		10,600	23,000	6,975	293,755	
SUZANNE MURPHY	(ı) (ıı)	245,938		63,566	23,000	25,071	357,575	
SCOTT FAHEY	(ı) (ıı)	172,507		51,684	24,904	8,712	257,807	
JANICE ROBINSON	(ı) (ıı)	171,147		45,951	25,250	10,274	252,622	
NANCY W STREIM	(ı) (ıı)	167,171		52,093	17,601	6,512	243,377	
SHARON L KAGAN	(ı) (ıı)	300,705		20,200	29,900	7,002	357,807	
ANN W ARMSTRONG	(ı) (ıı)	107,644	81,421	89,109	20,114	6,639	304,927	
RUTH VINZ	(ı) (ıı)	260,498		5,688	29,900	6,606	302,692	
MICHAEL A REBELL	(ı) (ıı)	260,856		4,600	32,200	28,030	325,686	
THOMAS R BAILEY	(ı) (ıı)	231,149		21,043	29,900	10,418	292,510	
JOHN FISCHER	(ı) (ıı)			20,000			20,000	
	(ii)							
	(i)							
	(ii)							

# Part III Supplemental Information

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

Ident if ier	Return Reference	Explanat ion
Pt I Line 1b		The College provides for certain employees commuting costs, housing, tuition assitance
		which are included in the employees taxable income
Pt I Line 4a		Anne Armstrong (highest compensated employees) received \$60,415 in severance payment
Pt I Line 8		ADDITIONAL PAYMENTS WERE MADE TO THE PRESIDENT OF THE COLLEGE AS PART OF
		THE INITIAL CONTRACT THIS CONTRACT WAS REVIEWED AND APPROVED BY THE
		O rganization pursuant to the rebuttable presumption procedure
Pt I Line 6a		Anne Armstrong (highly compensated employees) received a quarterly bonus based upon the
		net earnings for the Center of Education and Opportunities & Innovation

Software ID: Software Version:

**EIN:** 13-1624202

Name: TEACHERS COLLEGE COLUMBIA UNIVERSITY

		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation	
		(ii) Base Compensation  (ii) Bonus & Incentive compensation		(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
SUSAN FUHRMAN	(1) (11)	) 412,330	256,500	73,441	23,000	11,518	776,789	256,500	
THOMAS JAMES	(ı) (ıı)	) 258,088 )		66,989	23,000	15,442	363,519		
HARVEY SPECTOR	(1) (11)	) 253,180 )		10,600	23,000	6,975	293,755		
SUZANNE MURPHY	(1) (11)			63,566	23,000	25,071	357,575		
SCOTT FAHEY	(ı) (ıı)			51,684	24,904	8,712	257,807		
JANICE ROBINSON	(1) (11)	) 171,147		45,951	25,250	10,274	252,622		
NANCY W STREIM	(1) (11)			52,093	17,601	6,512	243,377		
SHARON L KAGAN	(1) (11)			20,200	29,900	7,002	357,807		
ANN WARMSTRONG	(1) (11)	107,644	81,421	89,109	20,114	6,639	304,927		
RUTH VINZ	(1) (11)			5,688	29,900	6,606	302,692		
MICHAEL A REBELL	(1) (11)			4,600	32,200	28,030	325,686		
THOMAS R BAILEY	(1) (11)	231,149		21,043	29,900	10,418	292,510		
JOHN FISCHER	(ı) (ıı)	,		20,000			20,000		

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

Schedule K

(Form 990)

DLN: 93493162010080

OMB No 1545-0047

Schedule K (Form 990) 2008

# **Supplemental Information on Tax Exempt Bonds**

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O. Department of the Treasury Internal Revenue Service

Open to Public **Inspection** 

	ne of the organization ACHERS COLLEGE COLUMBIA UNIV	ERSITY								' '	identificat	ion numl	per	
										13-1624	1202			
P	art I Bond Issues (Required)	for 2008)												
	(a) Issuer Name	(b) Issuer EIN (c) CUSIP #		(d) Date Issued		(e) Issu	e Price	<b>(f)</b> Des	scription of	Purpose	(g) Defeased		(h) O n Behalf o Issuer	
											Yes	No	Yes	No
A	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	6499037N5	01-29-	2009	51,	,832,990	Refund 07 ı	ssue & capı	talımpr		x	х	
Pa	Proceeds (Optional for 2	2008)			l									1
	T				Α	ı	В	1	С	D	)		E	
1	Total Proceeds of Issue													
	Gross Proceeds in Reserve Funds													
3	Proceeds in Refunding or Defeasan	ce Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures from	Proceeds												
7	Capital Expenditures from Proceeds	S												
8	Year of Substantial Completion													
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	š	No
9	Were the bonds issued as part of a	current refunding iss	ue?											
10	Were the bonds issued as part of ar	n advance refunding i	ssue?											
11	Has the final allocation of proceeds	been made?												
12	Does the organization maintain ade final allocation of proceeds?	quate books and rec	ords to support the											
Pa	rt IIII Private Business Use (	Optional for 2008)												
					4	l	В		c	D	)		E	
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	-	No
1	Was the organization a partner in a which owned property financed by t		mber of an LLC,											
2	Are there any lease arrangements which may result in private busines		nanced property											

Cat No 50193E

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		Α		В		C		D		I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(	<u>c</u>	ı	<u> </u>	E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

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OMB No 1545-0047

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# Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Transactions with Interested Persons** 

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

Name of the organization TEACHERS COLLEGE COLUMBIA UNIVERSITY						E	mploy	er ide	nt if ica	tion n	umber		
TEACHERS COLLEGE COLONIDIA ONIVERSITY						1	3-162	420	,				
art I Excess Benefit Transac	ctions (s	ection 501(	c)(3)	and section 50:	L (c)(								
To be completed by organizat										<u>', Part</u>	V , lıne	40b	
1 (a) Name of disqualifi	ed person			(h) Des	crintic	on of transaction				<u>[</u>	(c) Corrected?		
1 (2)				( <b>b</b> ) Des	сприс	ii oi tialise	action				Yes	No	
										$\rightarrow$			
2 Enter the amount of tax imposed or	n the organ	ıızatıon mana	agers	or disqualified pers	ons d	uring the y	ear ur	nder					
section 4958									\$				
3 Enter the amount of tax, if any, on l	ine 2, abov	ve, reimburs	ed by 1	the organization .				•	\$				
Part II Loans to and/or Fron	n Intere	sted Pers	ons										
To be completed by organiz	ations tha	t answered "	Yes" o	on Form 990, Part	IV, lır	e 26, or F	orm 9	90-E	Z, Part	V, lin	e 38a		
	( <b>b)</b> Loa	n to or					١.,	_		f)			
(a) Name of interested person and	from	from the		(c)Original principal		( <b>d)</b> Balance due		1 ' '				/rıtten ment?	
purpose	organız	ation?		amount	( <b>a</b> )Da	nance que	uela	uit.		uttee?	1 -		
	То	To From					Yes	No	Yes	No	Yes	No	
		•											
otal				▶ \$									
Part IIII Grants or Assistance							_						
To be completed by orga						art IV, lır	ne 27						
(a) Name of interested person	( t	-	-	veen interested pe organization	rson	( <b>c)</b> A m	ount o	of gra	nt or ty	pe of	assista	nce	
		and	i the c	nganization									
Part IV Business Transactions	s Involv	ing Intere	sted	l Persons		1							
To be completed by orga					90, P	art IV, lır	ne 28	a, 28	b, or	28c.			
		) Relationsh			T			-			( <b>e)</b> Sha	ring o	
(a) Name of interested person	betv	ween interest		(c) A mount of	f	(d) Descr	ription	oftra	ansacti	ion la	organız		
(m) 5	I	arcan and th	_	l transaction	- 1	( -,  - c c c c i					rovon	HAC 2	

REGINA CORTINA

organization

spouse Thomas James

122,816 College faculty employee

Yes

Νo

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# **SCHEDULE O** (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization
TEACHERS COLLEGE COLUMBIA UNIVERSITY

Employer identification number

13-1624202

Identifier	Return Reference	Explanation
Pt XI, Line 2c		THE AUDIT COMMITTEE OF THE TRUSTEES OF THE COLLEGE ARE RESPONSIBLE FOR THE OVERSIGHT OF THE COLLEGE'S FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR

ldentifier	Return Reference	Explanation
Pt VI-A, Line 4		THE BOARD OF TRUSTEES OF TEACHERS COLLEGE AMENDED THE COLLEGE'S BY LAWS EFFECTIVE DECEMBER 3, 2009 IN ADDITION TO SOME TECHNICAL CHANGES, THE AMENDED BY LAWS INCLUDE THE FOLLOWING CHANGES (1) INCREASED THE PERMISSIBLE NUMBER OF TRUSTEES, AS AUTHORIZE BY THE NEW YORK STATE BOARD OF REGENTS (2) REORGANIZED THE ARTICLE GOVERNING COMMITTEES AND INCORPORATED A MORE DETAILED DISCUSSION OF THE PROCEDURES FOR THE ELECTION OF COMMITTEES (3) PROVIDED FOR THE
		APPOINTMENT OF NON-TRUSTEES AS NON-VOTING MEMBE

Identifier	Return Reference	Explanation
Pt VI-A, Line 10		THE AUDIT COMMITTEE OF THE TRUSTEES OF THE COLLEGE IS CHARGED WITH THE RESPONSIBILTY OF MEETING WITH MANAGEMENT AND REVIEWING THE FORM 990 IN DETAIL A FINAL COPY OF ALL FORMS OPEN TO PUBLIC INSPECTION IS THEN PROVIDED TO THE FULL BOARD PRIOR TO FILING

Identifier	Return Reference	Explanation
Pt VI-B, Line 12c		TEACHERS COLLEGE HAS TWO CONFLICT OF INTEREST POLICIES, (A) ONE COVERING TRUSTEES, OFFICERS, KEY EMPLOYEES AND THE NEXT FIVE MOST HIGHLY COMPENSATED EMPLOYEES AND (B) A SECOND POLICY COVERING FACULTY AND INSTRUCTIONAL AND PROFESSIONAL EMPLOYEES UNDER BOTH POLICIES, CONFLICT OF INTEREST DISCLOSURE FORMS MUST BE COMPLETED ANNUALLY BY ALL PARTIES (A) TRUSTEES, OFFICERS, KEY EMPLOYEES, AND THE NEXT FIVE MOST HIGHLY COMPENSATED EMPLOYEES SUBMIT ANNUAL DISCLOSURES TO THE GENERAL COUNSEL, WHO REVIEWS

ldentifier	Return Reference	Explanation
		TEACHERS COLLEGE COMMITTEE ON COMPENSATION CONSISTS OF 7 INDEPENDENT TRUSTEE MEMBERS FROM THE CHAIR OF THE TRUSTEES, VICE CHAIRS FOR THE TRUSTEES, THE CHAIRS OF THE COMMITTEES ON
Pt V⊩B,		BUSINESS AND FINANCE, ACADEMIC AFFAIRS AND DEVELOPMENT AND EXTERNAL AFFAIRS, AND ONE OTHER
Line 15		TRUSTEE THE PRESIDENT EX OFFICIO ALSO SERVES ON THE COMMITTEE, BUT RECUSES HERSELF FOR
		CONSIDERATION OF HER COMPENSATION THIS COMMITTEE RECOMMENDS COMPENSATION TO THE EXECUTIVE
		COMMITTEE (WHICH WILL REPORT TO THE FULL BOARD) THE

ldentifier	Return Reference	Explanation
Pt VI-C, Line		FINANCIAL STATEMENTS ARE AVAILABLE ON THE COLLEGE'S WEBSITE THE COLLEGE'S CONFLICT OF INTEREST POLICY IS AVAILABLE ON THE COLLEGE'S INTRANET, AND THE COLLEGE DOES NOT MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
Part I, Line 1		TEACHERS COLLEGE ORGANIZATION MISSION TEACHERS COLLEGE'S HISTORIC FOCUS HAS BEEN ON BOTH EXCELLENCE AND EQUITY IN EDUCATION CREATED IN 1887 TO PREPARE A NEW BREED OF SCHOOL TEACHER TO EDUCATE IMMIGRANT CHILDREN, THE COLLEGE HAS BEEN HOME TO MANY OF THE DEFINING FIGURES IN AMERICAN EDUCATION, INCLUDING JOHN DEWEY, JAMES EARL RUSSELL, EDWARD LEE THORNDIKE, ISABEL MAITLAND STEWART, MORTON DEUTSCH, EDMUND GORDON AND MAXINE GREENE AMONG ITS MANY POINTS OF PRIDE, TC IS RECOGNIZED AS THE - BIRTHPLAC

lder	ntifier	Return Reference	Explanation
Part I 4c	ll, Line		ACADEMIC SUPPORT (CONTINUED) TO SUPPORT SCHOLARSHIP IN THESE AREAS, THE COLLEGE LIBRARY DEVELOPED EXTENSIVE RESEARCH COLLECTIONS THAT INCLUDE ABOUT 500,000 PRINTED VOLUMES TOGETHER WITH SUBSTANTIAL NON-PRINT

ldentifier	Return Reference	Explanation
Part III, Line 4d		STUDENT SERVICES (CONTINUED) THE FINANCIAL AID OFFICE HAS AWARDED MORE THAN \$17 MILLION IN STUDENT FINANCIAL AID DURING THE 2009-10 SCHOOL YEAR TC TODAY HAS ROUGHLY 5,100 STUDENTS, SOME 14 PERCENT OF WHOM COME FROM OUTSIDE THE US, REPRESENTING NEARLY 80 DIFFERENT COUNTRIES THOSE WHO ARE US CITIZENS REPRESENT 44 STATES, AND OVER A THIRD ARE MINORITIES THE COLLEGE'S NEARLY 40 STUDENT ORGANIZATIONS PLAY AN ACTIVE ROLE IN CAMPUS LIFE STUDENT GROUPS INCLUDE FRIENDS OF JAPAN STUDENTS IN HEALTH

#### DLN: 93493162010080

OMB No 1545-0047

2008

**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

**Related Organizations and Unrelated Partnerships** 

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

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Name of the organization TEACHERS COLLEGE COLUMBIA UNIVERSITY					ification number
Part I Identification of Disregarded Entities				13-1624202	
(A) Name, address, and EIN of disregarded entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	( <b>D)</b> Total income	<b>(E)</b> End-of-year assets	<b>(F)</b> Direct controlling entity
Part I Identification of Disregarded Entities    Name, address, and EIR of disregarded entity   Primary activity   Legal domicile (state or foreign country)   Total income   End-of-year assets   Direct controlling centity   Primary activity   Legal domicile (state or foreign country)   Primary activity   Legal domicile (state or foreign country)   Primary activity   Prima					
(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code sectio	n Public charity sta (if section 501(c)	(F) Direct controlling entity
THE DORIS DILLON CENTER DBA TC INNOVATION	N T I G I				
C/0 TEACHERS COLLEGE COLUMBIA UNIVE NEW YORK, NY100276696 13-4177653	Program Continuing Ed for	NY	501(c)(3)	170(b)(1)(A)(vı)	NA

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	<b>(B)</b> Primary ac		(C) Legal domicile (state or foreign country)	( <b>D)</b> Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	<b>(H</b> Disprop allocat	) rtionate ions?	(I) Code V—UBI on Box 20 of		Gener mana partr	ral o agıng
								Yes	No			Yes	No
Part IV Identification of Re	elated Org	anizations	Taxable as	a Corporation									
(A) Name, address, and EIN of related org	anızatıon	<b>(B)</b> Primary activi	ity Le	(C) gal domicile (state or foreign country)	( <b>D)</b> Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	<b>(F)</b> Share of total income	e	Sha end-c	<b>G)</b> re of of-year sets	<b>(H</b> Percer owne	ntage	
TC EDUCATIONAL SERVICES YK 4F MITSUI SEMEI SUIDOBASHI 101-0061 TOKYO JA		Educational Programs		JA	NA	С	-73,00	00		-763,000	100 00	00 %	

Part V Tran	sactions with Related Organizations
<b>Note.</b> Comple	ete line 1 if any entity is listed in Parts II, III or IV

Transactions with Related Organizations					
Note. Complete line 1 if any entity is listed in Parts II, III or IV			Y	/es	No
f L During the tax year, did the orgranization engage in any of the following transactions with	one or more related organizations listed in Parts II-IV	/?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		<b>1</b> a			No
<b>b</b> Gift, grant, or capital contribution to other organization(s)		115	,		No
c Gift, grant, or capital contribution from other organization(s)		10	: [		No
<b>d</b> Loans or loan guarantees to or for other organization(s)		10	一		No
e Loans or loan guarantees by other organization(s)		16			No
			$\top$		
f Sale of assets to other organization(s)		1f			No
g Purchase of assets from other organization(s)		19	, 🗀		No
h Exchange of assets		1h	,		No
i Lease of facilities, equipment, or other assets to other organization(s)		11			No
			$\top$		
j Lease of facilities, equipment, or other assets from other organization(s)		1j	+		No
k Performance of services or membership or fundraising solicitations for other organizat	tion(s)	1k			No
I Performance of services or membership or fundraising solicitations by other organizati	` '	11			No
m Sharing of facilities, equipment, mailing lists, or other assets	· ,	1n	n Y	/es	
n Sharing of paid employees		1n	1 Y	res	
<b>3</b>			十		
• Reimbursement paid to other organization for expenses		10	+		No
p Reimbursement paid by other organization for expenses			$^{+}$	_	No
F		<u> </u>	+		
<b>q</b> O ther transfer of cash or property to other organization(s)		19	+		No
r Other transfer of cash or property from other organization(s)		11		res	
To the dualities of east of property from other organization(3)		L.			
2 If the answer to any of the above is "Yes," see the instructions for information on who	must complete this line, including covered relationship	es and transaction thresholds			
	(B)	1			
<b>(A)</b> Name of other organization(s)	Transaction	(C) Amount Involved			
(1) TC EDUCATIONAL SERVICES YK	type(a-r)		1 [	0,000	
	1		130	0,000	

(A)  Name of other organization(s)	Transaction type(a-r)	<b>(C)</b> Amount Involved
(1) TC EDUCATIONAL SERVICES YK	г	150,000
(2)		
(3)		
(4)		
(5)		
(6)		

## Part VI Unrelated Organizations Taxable as a Partnership

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

									_			
<b>(A)</b> Name, address, and EIN of entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners		<b>(E)</b> Share of end-of-year assets			( <b>G)</b> Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?	)
			Yes	No		Yes	No		Yes	No		
			•			•	•	Sabadula	D / Form	000) 2000		

Software ID: Software Version:

**EIN:** 13-1624202

Name: TEACHERS COLLEGE COLUMBIA UNIVERSITY

#### Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
		Posit t	(C non ( hat a	chec		I			(5)	(F)
<b>(A)</b> Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
JAMES W B BENKARD , Trustee	3 00	Χ						0	0	0
LEE C BOLLINGER , Trustee	1 00	Х						0	0	0
CORY A BOOKER , Trustee	1 00	Х						0	0	0
GENE R CARTER , Trustee	1 00	Х						0	0	0
GEOFFREY J COLVIN , Trustee	1 00	Х						0	0	0
JAMES P COMER MD , Trustee	1 00	Х						0	0	0
JOYCE B COWIN , Trustee	1 00	Х						0	0	0
DAWN DUQUES , Trustee	1 00	Х						0	0	0
RUTH L GOTTESMAN , Trustee	3 00	Х						0	0	0
PATRICIA GREEN , Trustee	3 00	Х						0	0	0
ANTONIA M GRUMBACH , Trustee	3 00	Х						0	0	0
MARJORIE L HART , Trustee	1 00	Х						0	0	0
JOHN W HYLAND JR , Trustee & Co- Chair	5 00	Х						0	0	0
ELLIOT S JAFFE , Trustee	3 00	Χ						0	0	0
JOHN KLINGENSTEIN , Trustee	3 00	Х						0	0	0
JAN KRUKOWSKI , Trustee	1 00	Х						0	0	0
JULIE LEFF , Trustee	3 00	Х						0	0	0
EDUARDO J MARTI , Trustee	1	Х								
CLAUDE A MAYBERRY JR , Trustee	3	Х								
JOHN MERROW, Trustee	3	Х								
LORRAINE MONROE, Trustee	1	Х								
ABBY M O'NEILL , Trustee	1	Х								
DAILEY PATTEE , Trustee	3	Х								
E JOHN ROSENWALD JR , Trustee	3	Х								
WILLIAM D RUECKERT , Trustee & Co- Chair	5	Х								
MARLA SCHAEFER , Trustee	1	Х								
LAURIE M TISCH , Trustee & Vice Chair	3	Х								
GILLIAN NEUKOM TOLEDO , Trustee	1	Х								
JAY URWITZ , Trustee	1	Х								
STEVEN R WECHSLER , Trustee	3	Χ								

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

· · · · · · · · · · · · · · · · · · ·					
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a Tuition and fees	900,099	102,430,384	102,430,384		
<b>b</b> Auxiliary activity	900,099	12,808,231	12,808,231		
<b>c</b> Fees & contracts from gov agencies	900,099	7,966,116	7,966,116		
<b>d</b> Subscriptions & special collections	611,710	534,872	534,872		
e Curriculum Development	611,710	296,192	296,192		