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66930 Form

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)

2009 Open to Public

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service Inspection For the 2009 calendar year, or tax year beginning and ending FUND FOR THE EUROPEAN UNIVERSITY AT Please Check if applicable C Name of organization Employer identification number PETERSBURG Address change label or 59-3780793 Doing Business As Name change print or type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 1825 ENCORE LANE 734-730-9695 Specific Termination City or town, state or country, and ZIP + 4 5,041,742 G Gross receipts \$ Instruc-48103 ANN ARBOR Amended return tions. Name and address of principal officer H(a) Is this a group return for Application pending WILLIAM G ROSENBERG affiliates? H(b) Are all affiliates included? 1825 ENCORE LANE ANN ARBOR MI 48103 If "No," attach a list. (see instructions) X 501(c) Tax-exempt status (insert no.) 4947(a)(1) or 527 Website: ► N/A **H(c)** Group exemption number ▶ Type of organization X Corporation 2005 Year of formation M State of legal domicile Part I Summary 1 Bnefly describe the organization's mission or most significant activities: TO PROVIDE FINANCIAL SUPPORT THROUGH GRANTS FOR EDUCATIONAL, RESEARCH, AND ADMINISTRATIVE PROGRAMS IN THE SOCIAL SCIENCES AND HUMANITIES AT THE EUROPEAN UNIVERSITY AT ST. PETERSBURG, RUSSIA. 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 1,597, 4,411,478 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 14,815 45,377 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,612,086 4,456,855 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 593*.*750 532,077 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) ca 2,649 18,641 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A) ine 28 | V C C 596,399 550,718 1,015,687 3,906,137 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,072,544 6,548,632 21 Total liabilities (Part X, line 26) OGDEN 072,544 22 Net assets or fund balances. Subtract line 21 from line 20 6,548,632 Part II Signature Block/ Under penalties of peniny, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Here Signature of officer WILLIAM G ROSENBERG PRESIDENT Type or print name and title Preparer's identifying number Date Check if Preparer's (see instructions) Pald 4-8-10 signature employed > P00447547 Preparer's WEIDMAYER, SCHNEIDER, RAHAM & BENNETT 38-2172611 EIN Firm's name (or yours Use Only 635 SOUTH MAPLE P.O. BOX 2389 Phone if self-employed). address, and ZIP + 4 ▶ 734-662-2522 ANN ARBOR, MI 48106-2389

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

532,077

4e Total program service expenses ▶

	artis Official of Required Concedures			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_	Yes	No
•	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	<u> </u>		
	Schedule C, Part II	4	1	x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	<u> </u>		
	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 similar funds or accounts where donors have	<u> </u>		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			i
	complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	├		
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	 		
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; 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,"			1
	complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	├		
	quasi-endowments? If "Yes," complete Schedule D, Part V	40	x	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	10	<u> </u>	_
• •	VII, VIII, IX, or X as applicable			x
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	11		
•	Schedule D, Part VI.		Ī	
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
•				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		:	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		3	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1	
42	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		:	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		X	
424	Schedule D, Parts XI, XII, and XIII.	12	^	
144	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. 12A			
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			v
		13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			v
4 6	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		·	
46	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	.		32
4 -	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	_		4.5
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			7-
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
^^	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990	(2009

	1 990 (2009) FUND FOR THE EUROPEAN UNIVERSITY AT 59-3780793	••	<u>, b</u>	age 4
<u>Pa</u>	art IV Checklist of Required Schedules (continued)			ı
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			İ
	organization's current and former officers, directors, trustees, key employees, and highest compensated			۱
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	ł		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	ľ		
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			1
	pnor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part i	25b		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	į		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	-		l
	If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	1		l
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	_	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	l		
	III, IV, and V, line 1	34		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	- 1		
	Part VI	37		X
20	Did the erganization complete Schodule O and provide evaluations in Schodule O for Part VI. June 44 and	ı	1	I .

19? Note. All Form 990 filers are required to complete Schedule O

P	art V Statements Regarding Other IRS Filings and Tax Compliance	_						
							Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1					.	
	U.S. Information Returns. Enter -0- if not applicable	1a	0]]		ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_1b_	0					
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	portabl	е				·	i
	gaming (gambling) winnings to prize winners?	, ,				1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0					İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns				•	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see							į
_	instructions)							į
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by						
L	this return?		•			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O					3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ty					
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	anciai						77
L	account)?			•		4a		X
b	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Dank	• •					
	and Financial Accounts	вапк						
5a						_		v
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	tion?	•		•	5a		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Req					5b		
·	Prohibited Tax Shelter Transaction?	arung				5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	Δ.			• ••	130		
-	organization solicit any contributions that were not tax deductible?					6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or		• •	• •	Va		
-	gifts were not tax deductible?					6ь		
7	Organizations that may receive deductible contributions under section 170(c).	•	• •		•	"		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution and partly for organization receives a payment in excess of \$75 made partly as a contribution of the partly and the partly as a	aoods						
	and services provided to the payor?	,				7a	İ	X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	• •	•	• • •		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs	•	•	•			
	required to file Form 8282?					7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			• •			
8	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	ıl			1 1		
	benefit contract?					7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		_		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			-		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as						
	required?					7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting							
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						-	
	organization, have excess business holdings at any time during the year?					8		X
9	Sponsoring organizations maintaining donor advised funds.						1	
a	Did the organization make any taxable distributions under section 4966?					9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			• •		9b		X
10	Section 501(c)(7) organizations. Enter:	1 1						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				1		
11	Section 501(c)(12) organizations. Enter:	امما						
a	Gross income from embers or shareholders Gross income from other sources (Do not not amounte due or poid to other sources against	11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against	44.					1	
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in liqu of Form	11b				12-	ı	
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or account during the year.	1 1	•			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				г. <u>1</u> .	E	

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

<u>3ec</u>	tion A. Governing Body and Management			
10	Enter the number of voting members of the governing body		Yes	<u>No</u>
1a b	Enter the number of voting members of the governing body Enter the number of voting members that are independent 1b 7	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	┪ :		
-	any other officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct	+		
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	۲		
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		$\frac{\mathbf{x}}{\mathbf{x}}$
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
-	the year by the following			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		<u>X</u>
14	Does the organization have a written document retention and destruction policy?	14		X
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		<u>X</u>
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		<u>X</u>
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		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ MI			
18	Section 6104 requires an organization to make its Forms 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 Another's website X Upon request			
19	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.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► WILLIAM G. ROSENBERG 1825 ENCORE LANE	4	۰. م	^ -
_ <u>A1</u>	N ARBOR MI 48103 73	4-76	<u>9-3</u>	U 64

Form 990 (2009) FUND FOR THE EUROPEAN UNIVERSITY AT 59-3780793

Page 7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees, and former such persons.

(A) Name and Title	(B) Average	Pos	ition ((chec	C) k all t	that ap	oply)		(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
PROF WILLIAM G RO										
PRESIDENT	1.00	X	<u> </u>	X	_			0	0	
PROF HARLEY BALZE TREASURER	1.00	x		x				o	0	•
PROF GAIL LAPIDUS		<u> </u>		^		\vdash		0		
SECRETARY	1.00	x		x				o	o	
PROF MARY MCAULES										
DIRECTOR	1.00	X						0	0	
PROF LOREN GRAHAN										
DIRECTOR WM. NEWTON-SMITH	1.00	X		<u> </u>		\vdash		0	0	
DIRECTOR	1.00	x						o	o	
PROF NIKOLAI VAKE		-								
DIRECTOR	1.00	X			<u> </u>			0	0	
RECTOR OLEG KHARI							:			
DIRECTOR	1.00	X	_		ļ			0	0	
	 	_								
			_						-	
							-			

(A) Name and Title		(B) Average		_		C)	that a		(D) Reportable	(E)		(F)	
name and Tide		hours per week	or director		Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo comp fro orga and	mated bunt of ther ensation m the nization related izations	
													_
					ļ						·		
•	•												
	- (
1b Total	uduala (ia	-1	l 4		**	- 1-		>		#400 000 in			
2 Total number of indiv reportable compensa		-			เทอร	e iis	teo a	DOV	e) who received more than	\$100,000 in			
employee on line 1a ⁷ 4 For any individual list the organization and individual 5 Did any person listed	P If "Yes," ted on line related or on line 1	complete Sche e 1a, is the sum rganizations gre a receive or ac	dule of re ater crue	J for eporta than comp	suc able \$15 pens	h ind com 0,00	dividuo ipens 0? If	al atio "Ye n an	oyee, or highest compensation and other compensation s," complete Schedule J for any unrelated organization for	from r such	3		x
services rendered to Section B. Independent (, COI	mpie	te S	cnec	lule J	tor	such person .	· · ·	5		X
Complete this table for compensation from the compensation from the complete this table for compensation from the compensation	he organi	zation.	ensa	ated i	inde	pend	lent o	cont	ractors that received more				
	Name and	(A) business address						_	Descrip	(B) tion of services		(C) Compens	ation
								_					
				_			_	_					
								<u> </u>					
<u> </u>	- -												
								<u> </u>					,
2 Total number of inde	nendent d	contractors (incl	udina	לווח ני	not	limit.	ed to	tho	se listed above) who receiv	red	F		

P	art V	III Stater	ment of Reve	enue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated car	mpaigns	1a				, <u>, , , , , , , , , , , , , , , , , , </u>		,,
Iran	ь	Membership o		1b						
s, g	c	Fundraising e	vents	1c			1			
gift	d	Related organ		1d						
ž.E	e	Government grants		1e						
tion	f	All other contribution	ns, gifts, grants,		•					
章		and similar amounts	s not included above	1f	4,	411,478				
	g	Noncash contribution	ons included in lines 1a	-1f \$						
<u>ۃ ت</u>	h	Total. Add line	es 1a–1f			· • 1	4,411,478			
Program Service Revenue Contributions, gifts, grants						Busn. Code				
Vē.	2a									
8	b		•							
<u>S</u>	С			•	• •					
Ser	d						-			
æ	e			•						
go	f	All other progr	ram service reve	nue	•					
<u>ځ</u>	g	Total. Add line	es 2a–2f			•				
	3	Investment inc	come (including	dividen	ds, intere	est, and				
		other similar a	mounts)			▶ L	91,553			91,553
	4	Income from I	nvestment of tax	-exemp	t bond p	roceeds 🕨				
	5	Royalties		<u></u>		▶				
			(ı) Real		(II) F	Personal				
	6a	Gross Rents					[
	ь	Less rental exps								
	С	Rental inc or (loss)					•			
	_d	Net rental inco			··	•				
	/a	Gross amount from sales of assets	(i) Securities		(u)	Other				
		other than inventory	538,	711						
	b	Less cost or other								
		basis & sales exps	584,							
	C	Gain or (loss)	-46,	176						
	d	Net gain or (lo	ss)	<u>-</u>	<u> </u>	•	-46,176			-46,176
ne	8a		om fundraising eve	nts		i				
nu		(not including \$.		1				
lev			reported on line 1c)).		ŀ				
Other Reven		See Part IV, line	•	a _						
		Less: direct ex	• • •	Ь∟						
			(loss) from fund		events	•				
	9a		om gamıng actıvıtie	s		i				
		See Part IV, line		a						
		Less: direct ex	-	ьĹ						
			(loss) from gam	ing acti	vities					
	10a		f inventory, less							
		returns and all		. a						
		Less cost of g	• • • • • • • • • • • • • • • • • • • •	ь						
	С		(loss) from sale		entory	•	 ,,			
- 1		Misc	ellaneous Revenue	1		Busn. Code				
	11a		• •							
	b				•	 				
	C					<u> </u>				
	d	All other reven		• •	•	L				······
		Total. Add line	•			🕨 📙	4.5.5.5.5			
- 1	12	Total Revenue	 See instruction 	ns.		▶	4,456,855	Ol	ol	45,377

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must d				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	532,077	532,077		······································
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)		}		
	and section 403(b) employer contributions)				
9	Other employee benefits	3			
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management	200		200	
b	Legal	9,640		9,640	
C	Accounting	9,040		9,040	
d	Lobbying Professional fundraising services See Part IV, line 17				
e f	Investment management fees	7,307		7,307	<u> </u>
g	Other	7,507		7,507	
12	Advertising and promotion				
13	Office expenses	120		120	
14	Information technology				
15	Royalties	·			
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,374		1,374	
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
	~				
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.)			<u> </u>	
a b	• • •				
0					
d	• • •				
e					
f	All other expenses			- · · · · · · · · · · · · · · · · · · ·	•
25	Total functional expenses. Add lines 1 through 24f	550,718	532,077	18,641	
26	Joint costs. Check here ▶ 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				

_Part	X Balance Sheet			rage r
		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing	27,140	1	17,653
2	Savings and temporary cash investments	206,647	2	36,705
3	Pledges and grants receivable, net		3	609,033
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			,
	employees, and highest compensated employees Complete Part II of			
- 1	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
,,	Part II of Schedule L]	6	
Assets	Notes and loans receivable, net		7	
8 8	Inventones for sale or use		8	
▼ 9	Prepaid expenses and deferred charges		9	
10	a Land, buildings, and equipment, cost or			
	other basis. Complete Part VI of Schedule D 10a			
1	Less accumulated depreciation 10b	1	10c	
11	Investments—publicly traded secunties	838,757	11	5,885,241
12	Investments—other secunities See Part IV, line 11	3337.31	12	<u> </u>
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,072,544	16	6,548,632
17	Accounts payable and accrued expenses	2/0/2/044	17	0,340,032
18	Grants payable		18	·
19	Deferred revenue		19	
20	Tax-exempt bond liabilities	<u> </u>	20	
1	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities 52	Payables to current and former officers, directors, trustees, key			
<u>=</u> <u>=</u>	employees, highest compensated employees, and disqualified			
<u>.e</u>	persons. Complete Part II of Schedule L		20	
23	Secured mortgages and notes payable to unrelated third parties		22	
24	Unsecured notes and loans payable to unrelated third parties		23	· -
25	Other liabilities. Complete Part X of Schedule D		24	
26	Total liabilities. Add lines 17 through 25		25	
	Organizations that follow SFAS 117, check here ▶ 🗶 and		26	
8	complete lines 27 through 29, and lines 33 and 34.			
E 27	Unrestricted net assets	-109,802		27 225
E 28	Temporarily restricted net assets		27	37,335
D 29	Permanently restricted net assets	4 4 4 4 4 4 4 4	28	722,430
5 2	Organizations that do not follow SFAS 117, check here ▶	1,130,946	29	5,788,867
ᆫ	and complete lines 20 through 24			
O 30	and complete lines 30 through 34. Capital stock or trust principal, or current funds			
31			30	·
SS	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 10 00 00 00 00 00 00 00 00 00 00 00 00 0	Retained earnings, endowment, accumulated income, or other funds	1 070 544	32	C F10 C00
₹ 33	Total net assets or fund balances		33	6,548,632
Z 34	Total liabilities and net assets/fund balances	1,072,544	34	6,548,632

Form **990** (2009)

orm	990 (2009) FUND FOR THE EUROPEAN UNIVERSITY AT 59-3780793		'Pa	ge 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		ļ.

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

FUND FOR THE EUROPEAN UNIVERSITY AT

ST. PETERSBURG 59-3780793
on for Public Charity Status (All organizations must complete this part.) See instructions

P	ert I	Reas	on for Public	Charity	Sta	tus (All organization	ns must (comple	te this	part.)	See i	nstruct	ions			
he	orga					s: (For lines 1 through 11										
1		A church, co	nvention of churc	hes, or ass	ociat	ion of churches describe	d in section	n 170(b)([.]	1)(A)(i).							
2	П	A school des	cribed in section	170(b)(1)(A)(ii)	. (Attach Schedule E.)										
3	\sqcap					ganization described in s	ection 170	(b)(1)(A)(iii).							
4	П					conjunction with a hospita			•)(1)(A)(iii). Ente	er the ho	soital	's name		
		city, and stat		•					•		•				•	
5		•		he benefit o	of a c	college or university owne	d or operat	ed by a d	overnm	ental un	ıt descr	 ibed in			•	
			b)(1)(A)(iv). (Con					, 3								
6	П					nmental unit described in	section 17	70(b)(1)(A	MV).							
7	Н		_			tantial part of its support				from the	e dener	at public				
	ш	_	section 170(b)(1)			• • • • • • • • • • • • • • • • • • • •	901				90.101	ai public				
8)(1)(A)(vi). (Complete Pa	rt II)									
9	H					ore than 33 1/3 % of its su		contribut	ione m	amharch	nin face	and are	nee			
•	Ш					inctions—subject to certa						_				
						related business taxable										
						75. See section 509(a)(2				×,	34311103	303				
10	\Box		•			sively to test for public sa	• • •		•							
11	X	-	-	-		sively for the benefit of, to	-				v out th	Δ.				
• •						ganizations described in					•		i			
						pe of supporting organiza						5551.511				
		a Type	==			c Type III–Functio			d		e III–O	ther				
е	X			• -	anıza	ation is not controlled dire										
•						other than one or more p	-				•		1			
			section 509(a)(2).						,				,			
f			` ` ` `		ermina	ation from the IRS that it	is a Type I	. Type II.	or Type	III supp	ortina					
•			check this box					, . , , ,	,,,							
g		Since Augus	t 17, 2006, has th	e organiza	tion a	ccepted any gift or contri	Ibution fron	n anv of tl	ne		••					
•		following per		J		. , , ,		•								
				ndirectly co	ontrol	s, either alone or togethe	r with pers	ons descr	ibed in (ïiγ					Yes	No
						supported organization?				/				11g(i)		X
			member of a per	•		• • •				• •	••			11g(ii)		X
			•			ibed in (ı) or (ıı) above?	•			•	• • •	•	•	11g(iii)		X
h						upported organization(s).					•	•	• • • •	(
(i)	Name	of supported	(ii) EIN			(III) Type of organization	(iv) is the	organization	(v) Did	ou notify	(vi)	Is the		(vii) Am	ount of	
•		anization	, ,		ŀ	(described on lines 1-9	1,,,	sted in your	the organ	nization in	organiza	tion in col		supp		
						above or IRC section	governing	document?		of your port?		zed in the				
					1	(see instructions))	Yes	No	Yes	No	Yes	No				
ΕU	RO	PEAN UN	IVERSITY	AT S	r.	PETERSBURG										
						7	x		x			x		5	32,6	78
	-														<u>- , </u>	
							-			†	-	1				
					_			 	ļ	ļ		 				
					İ				1							
				-			+	<u> </u>	 		†	 				
								1								
							_	-			-					
ota														5	32.0	77

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

Schedule A (Form 990 or 990-EZ) 2009

Sche	edule A (Form 990 or 990-EZ) 2009 FUN	D FOR THE	E EUROPEA	N UNIVERS	ITY AT 59	-3780793	3	′ Page 2
P	art II Support Schedule for O	rganizations [Described in S	Sections 170(b)(1)(A)(iv) and	170(b)(1)(A)		
	(Complete only if you che						• ,	
Sec	tion A. Public Support							
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) T	Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				-			
6	Public support. Subtract line 5 from line 4		,					
Sec	tion B. Total Support							
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) T	otal
7	Amounts 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 activities, whether or not the business is regularly carned on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10				<u> </u>	<u> </u>		
12	Gross receipts from related activities, etc	. ,				. 1	2	
13	First five years. If the Form 990 is for the	organization's first	t, second, third, fo	ourth, or fifth tax yea	ar as a section 50	1(c)(3)		_
	organization, check this box and stop her							<u> </u>
Sec	tion C. Computation of Public St	ipport Percen	tage				.,	
14	Public support percentage for 2009 (line 6	, column (f) divide	d by line 11, colur	nn (f))		1.		%_
15	Public support percentage from 2008 Sch					. L <u>1</u>	5	%
16a	33 1/3 % support test—2009. If the organ	iization did not che	eck the box on line	e 13, and line 14 is	33 1/3 % or more,	check this box		
	and stop here. The organization qualifies	as a publicly supp	orted organizatior	1				▶ _
b	33 1/3 % support test—2008. If the organ	ization did not che	eck a box on line 1	3 or 16a, and line	15 is 33 1/3 % or i	nore, check this		_
	box and stop here. The organization qual	fies as a publicly s	supported organiz	ation	•			
17a	10%-facts-and-circumstances test—200	9. If the organizati	on did not check	a box on line 13, 16	Sa, or 16b, and line	e 14 is 10% or		
	more, and if the organization meets the "fa	acts-and-circumsta	ances" test, check	this box and stop	here. Explain in P	art IV how the		
	organization meets the "facts-and-circums	tances" test. The	organization quali	fies as a publicly s	upported organiza	tion		▶ _
h	10%-facts-and-circumstances test-200	9 If the erganizati	on did not chack	a boy on line 12, 14	So 16h or 17a or	d line 15 is 100/	^-	

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you che	ecked the box	on line 9 of Pa	art I.)			
	tion A. Public Support			· · · · · · · · · · · · · · · · · · ·			
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received				İ		
	from other than disqualified persons that	1					
	exceed the greater of \$5,000 or 1% of the					1	
	amount on line 13 for the year						
С	Add lines 7a and 7b	,			<u> </u>		
8 —	Public support (Subtract line 7c from line 6.)				!		<u></u> .
	tion B. Total Support		•		· · · · -		
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6				<u> </u>	-	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		 	unth on Efficiency up		1(0)(2)	
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	t, secona, tnira, io	urth, or lifth tax ye	ar as a section 50	I(C)(3)	▶ [
Sac	tion C. Computation of Public Su		tane	·		 · · _ · _	
15	Public support percentage for 2009 (line 8			nn (fl)		15	
16	Public support percentage from 2008 Scho		-			16	%
	ction D. Computation of Investme			· · · · ·	···		76
17	Investment income percentage for 2009 (II			3. column (f))		17	%
18	Investment income percentage from 2008	· ·	-	.,		18	%
19a	33 1/3 % support tests—2009. If the orga		•	e 14, and line 15 is	s more than 33 1/3		
	17 is not more than 33 1/3 %, check this b						▶ [
ь	33 1/3 % support tests—2008. If the orga	-				•	
	line 18 is not more than 33 1/3 %, check the						▶ [
20	Private foundation. If the organization did	=				-	▶ [

1	Part IV	Supplement Part II, line	ital Infor	mation. Co	mplete this	s part to	provide	e the exp	lanation	s required	by Part I n. See ins	I, line 10;	Page 4
·													
•				•			•			•	••	·	
• •								•	•		•		•
٠							•	•	٠		•		
		•		•				•				•	
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				•							•		
		•						•					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes." to Form 990. Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public

OMB No 1545-0047

Inspection Name of the organization Employer identification number FUND FOR THE EUROPEAN UNIVERSITY AT ST. PETERSBURG 59-3780793 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ __ _ _ _ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sched	· · · · · · · · · · · · · · · · · · ·	HE EUROPEAN							ge Z						
Par	rt III Organizations Maintaining (Collections of Art,	Historical Treas	sures, or Other	Similar A	ssets	(continu	ied)							
	collection items (check all that apply):														
а	Public exhibition	d Loan o	or exchange program	าร											
b	Scholarly research	e Other				_									
С	Preservation for future generations	_				_									
4	Provide a description of the organization's colle Part XIV	ections and explain how	they further the organ	nızatıon's exempt pu	ırpose ın										
5	Dunng the year, did the organization solicit or rassets to be sold to raise funds rather than to be	receive donations of art, be maintained as part of	historical treasures, of the organization's co	or other similar ollection?			Yes		No						
Pa	rt IV Escrow and Custodial Arrai	ngements. Comple	te if the organiza	ation answered	"Yes" to F	orm 9	90, Par	t							
	IV, line 9, or reported an am	ount on Form 990,	Part X, line 21.												
1a	Is the organization an agent, trustee, custodiar	n or other intermediary fo	r contributions or oth	ner assets not	 -	· -									
	included on Form 990, Part X?					_	Yes	; []	No						
b	b If "Yes," explain the arrangement in Part XIV and complete the following table:														
С	c Beginning balance														
	c Beginning balance d Additions during the year														
Α.	Distributions during the year				1e			•	_						
f			•		1f				_						
2a	f Ending balance														
	2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV.														
	rt V Endowment Funds. Comple	ete if organization a	nswered "Yes" t	o Form 990. Pa	rt IV. line	10.									
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three ye		(e) Four	vears b	ack						
19	Beginning of year balance	2,033,757	50,446	_ ````````````											
	Contributions	3,587,921	1,100,500												
		3,30.,322	2/200/500												
C	Net investment earnings, gains,	579,564	-167,189												
	and losses	305,000	-107,109												
	Grants or scholarships	303,000		<u> </u>											
е	Other expenditures for facilities														
_	and programs														
	Administrative expenses	5 000 040	202 757			•••••									
g	End of year balance	5,896,242	983,757		<u> </u>		L								
2	Provide the estimated percentage of the year	end balance held as:													
	Board designated or quasi-endowment	%													
b	Permanent endowment ► _100.00%														
С	Term endowment ▶ %														
3a	Are there endowment funds not in the possess	sion of the organization the	nat are held and adm	inistered for the			_								
	organization by:							Yes	No						
	(i) unrelated organizations						3a(i)		X						
	(ii) related organizations						3a(ii)		<u> </u>						
b	If "Yes" to 3a(II), are the related organizations	listed as required on Sch	edule R?				3b								
4	Describe in Part XIV the intended uses of the	organization's endowmer	nt funds	·											
Pa	rt VI Investments—Land, Buildir			0, Part X, line 1	0.										
	Description of investment	(a) Cost or other basis	(b) Cost or oth	ner (c) Acc	cumulated		(d) Book v	alue							
		(investment)	basis (other) depr	eciation	- 1									
1a	Land			1				-							
	Buildings								-						
	Leasehold improvements														
	Equipment														
	Other		<u> </u>			_									
_	. Add lines 1a through 1e (Column (d) must eq	ual Form 990 Part X co)											
			· · · · · · · · · · · · · · · · · · ·	, .	,	- 1									

Schedule D (F	orm 990) 2009 FUND FOR THE EUROPEAN	UNIVERSITY A	AT 59-3780793	Page 3
Part VII	Investments—Other Securities. See Form 99			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	alue
Financial denv	/atives			_
	equity interests			-
Other				
- - - -		*****		
	 			
_ _				
– – –				
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII	Investments—Program Related. See Form 99	0. Part X. line 13.	· · · · · · · · · · · · · · · · · · ·	
	(a) Description of investment type	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market va	alue
		· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·			
				<u></u>
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				····
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Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description		(b)	Book value
-				
		<u> </u>		
•				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		>	
Part X	Other Liabilities. See Form 990, Part X, line 2	5.		
<u>1</u>	(a) Description of liability	(b) Amount		
Federal incom	e taxes		_	
]	
<u>-</u>			4	
			_	
]	
			4	
			_	
			_	
			1	
			1	

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

organization's liability for uncertain tax positions under FIN 48.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the

	dule D (Form 990) 2009 FUND FOR THE EUROPEAN UNIVERSITY AT 59-378079		Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,456,855
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	550,718
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	3,906,137
4	Net unrealized gains (losses) on investments	4	519,951
5	Donated services and use of facilities	_5	
6	Investment expenses	6	
7	Pnor period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	519,951
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	4,426,088
Pa	at XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	4,976,806
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a 519, 951		
b	Donated services and use of facilities 2b		
С	Recovenes of prior year grants 2c		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e_	519,951
3	Subtract line 2e from line 1	3	4,456,855
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	4 456 055
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,456,855
	Reconciliation of Expenses per Audited Financial Statements With Expenses per F		
1	Total expenses and losses per audited financial statements	1	550,718
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
C	Other losses 2c		
d	Other (Describe in Part XIV)	_	
9	Add lines 2a through 2d	2e	550,718
3	Subtract line 2e from line 1	3	330,718
*	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV) Add lines 4a and 4b	4.	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c 5	550,718
5 D:	nt XIV Supplemental Information	_ 3	330,110
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
	2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete		
	part to provide any additional information.		
u ,			
			

Schedule D (Form 990) 2	2009 I	<u>TUND</u>	FOR	THE	EUR	OPEAN	I UNI	<u> IVERS</u>	ITY	AT	59-	-378	3079:	3		Page 5
Schedule D (Supple	ementa	I Info	rmatio	n (con	tinued)										
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Schedule F (Form 990) Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990,
 Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

2009

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury internal Revenue Service

Name of the organization

FUND FOR THE EUROPEAN UNIVERSITY AT

ST. PETERSBURG

Employer Identification number 59-3780793

Part I	General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.													
1 For grant			ords to substantiate the amount of the	e grants or										
			sistance, and the selection criteria us											
	or assistance?			· ·	Yes No									
2 For grant United St		Part IV the organization	's procedures for monitoring the use	of grant funds outside the										
3 Activities	per Region. (Use Sch	edule F-1 (Form 990) if	additional 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 the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region									
	:													
		-		-										
otals >														

FUND FOR THE EUROPEAN UNIVERSITY AT 59-3780793 Schedule F (Form 990) 2009

66930

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ □ Use Schedule F-1 (Form 990) if additional space is needed. Part II

(I) Method of valuation (book, FMV, appraisal, other)									!		
(h) Description of non-cash assistance											
(g) Amount of non-cash assistance	FER	FER	FER	FER							
(f) Manner of cash disbursement	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER							
(e) Amount of cash grant	19,400	201,677	305,000	6,000							
organization (b) IRS code (c) Region (d) Purpose of grant (if applicable)	AVI CHAI GRANT	CTR FOR RULE OF LAW	GENERAL PROGRAMS	UM-EU TELEVIDEO COUR							
(c) Region	RUSSIA	RUSSIA	RUSSIA	RUSSIA							
(b) IRS code section and EIN (if applicable)											
1 (a) Name of organization											

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 FUND FOR THE EUROPEAN UNIVERSITY AT 59-3780793

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

Part III

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i .	ı	1	1	1	1	1	ı	1	ı	ŀ	ı	1	
(h) Method of valuation (book, FMV, annraisal other)	(come imposed de												
(g) Description of non-cash assistance													
(f) Amount of non-cash assistance													
(e) Manner of cash disbursement													
(d) Amount of cash grant										-			
(c) Number of recipients													
(b) Region													
(a) Type of grant or assistance (b) Region (c) Number of (d)													

Schedule F (Form 990) 2009

Part IV Supplemental Information

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
THE BOARD OF DIRECTORS MEETS TWICE A YEAR AT THE EUROPEAN UNIVERSITY AT ST.
PETERSBURG, 3 GAGARINSKAIA STREET, ST. PETERSBURG, RUSSIA, AND HEARS
DETAILED REPORTS FROM THE UNIVERSITY'S RECTOR AND FINANCE DIRECTOR
CONCERNING THE USE OF THE GRANTS ALLOCATED BY THE FUND OF THE UNIVERSITY.
IN ADDITION, THE RECTOR OF THE EUROPEAN UNIVERSITY SITS AS A MEMBER OF THE
FUND'S BOARD OF DIRECTORS AND COMMUNICATES REGULARLY TO THE BOARD
CONCERNING THE USE OF THE FUND'S GRANTS. FOUR OTHER MEMBERS OF THE FUND'S
SEVEN MEMBER BOARD OF DIRECTORS (PROFESSORS BALZER, LAPIDUS, MCAULEY, AND
ROSENBERG) ALSO SIT ON THE EUROPEAN UNIVERSITY'S BOARD OF TRUSTEES AND
ATTEND ITS MEETINGS IN JUNE AND DECEMBER.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009

Open to Public Inspection

FUND FOR THE EUROPEAN UNIVERSITY AT Employer identification number Name of the organization ST. **PETERSBURG** 59-3780793 FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS GRANT OF \$6,000 TO THE EUROPEAN UNIVERSITY AT PETERSBURG FOR UM-EU TELEVIDEO COURSES. LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM A DRAFT COPY OF FORM 990 IS REVEIWED BY THE BOARD PRESIDENT BEFORE BEING FILED. FORM 990, PART VI, LINE 12C ENFORCEMENT OF CONFLICTS POLICY THE BOARD REQUIRES STATEMENTS TWICE A YEAR AT ITS BOARD MEETING FROM DIRECTORS REVIEWING THEIR ACTIVITIES AND AFFIRMING ADHERENCE POLICY. PART VI, LINE 19 -GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION MAKES ALL OF ITS GOVERNING DOCUMENTS AVAILABLE TO PUBLIC BY REQUEST.