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Department of the Treasury Internal Revenue Service

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)

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

Open to Public Inspection

	A F	or the	2009 cal	endar year, or tax year beginning JUL, 1, 2009 and ending	JUN 30, 2010	
	 В с	heck if	1	C Name of organization	D Employer identifi	cation number
	a	pplicable	Please use IRS	THE CITY UNIVERSITY OF NEW YORK		
	Г	Addres	s label or print or	SCHOOL OF LAW FOUNDATION INC.		
	X	Name change	type	Doing Business As	11-3	235349
	7	Initial return	See	Number and street (or P O box if mail is not delivered to street address) Room/sul		
		Termin	Specific Instruc-			340-4283
		Amend		City or town, state or country, and ZIP + 4	G Gross receipts \$	1,693,818.
		Application	3-	FLUSHING, NY 11367	H(a) Is this a group re	
		pendin	g F Nan	ne and address of principal officer:PAULA BOSCO	for affiliates?	Yes X No
			787		H(b) Are all affiliates inc	cluded? Yes No
	1 T	ax-exe	mpt statu	is: X 501(c) (3) ◀ (insert no.)	If "No," attach a	list (see instructions)
	JV	Vebsit	e:▶ WW	W.LAW.CUNY.EDU	H(c) Group exemption	on number
	K F	orm of	organizatio	n X Corporation	ar of formation 1994	M State of legal domicile NY
	Рε	rt I	Summ			
=	Governance			scribe the organization's mission or most significant activities ${\color{red} { ext{SUPPORT}} ext{ E}}$	DUCATIONAL N	EEDS OF
2011	nai	-		s box if the organization discontinued its operations or disposed of me	ore than 25% of its net as	ssets
စ္	Ve			f voting members of the governing body (Part VI, line 1a)	3	18
8	Ğ			f independent voting members of the governing body (Part VI, line 1b)	4	13
æ	S.			ber of employees (Part V, line 2a)	5	0
FEB	itie/			ber of volunteers (estimate if necessary)	6	0
	Activities &			s unrelated business revenue from Part VIII, column (C), line 12	7a	0.
Щ	⋖		-	ated business taxable income from Form 990-T, line 34	7b	0.
SCANNED					Prior Year	Current Year
Q	e e	8 (Contributi	ons and grants (Part VIII, line 1h)	1,641,141.	1,126,883.
	Revenue	9 1	Program s	service revenue (Part VIII, line 2g)		
00	ě	10	Investmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)	20,751.	14,600.
	•	11 (Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
		12	Total reve	nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,661,892.	1,141,483.
		13 (Grants an	d similar amounts paid (Part IX, column (A), lines 1-3)	367,500.	257,610.
		14	Benefits p	eald to or for members (Part IX, column (A), line 4)		
	Sa	15	Salaries, d	other compensation, em ployee penefits (Eart X. column (A), lines 5·10)	272,394.	276,474.
	Sus	16a l	Professio	nal fundraising fees (Par IX, column (A), fine (1 te)		
	Expenses			raising expenses (Part IX, column (D), line 25)		
	ш	17 (Other exp	enses (Part IX, column (Agines FEED 16, 1)11241)	601,174.	547,277.
		18	Total expe	enses. Add lines 13-17 (must equal Part IX, column (A) tine 25)	1,241,068.	1,081,361.
		19	Revenue l	ess expenses. Subtract line 18 from line 12	420,824.	60,122.
	Net Assets or Fund Balances			L OGDEN, UT	Beginning of Current Year	End of Year
	sset	l		ets (Part X, line 16)	1,936,989.	1,992,784.
	age and a	l		ities (Part X, line 26)	88,007.	75,070.
			•	s or fund balances Subtract line 21 from line 20	1,848,982.	1,917,714.
	Pa	ert II		ture Block		
			and comple	tites of perjury, I declare that I have examined this return, including accompanying schedules and statemen te Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	is, and to the best of my knowled ge	ige and belief, it is true, correct,
					1	
	Sig	- 1	Sign	ature of officer	I Date	
	Her	e	_	EGORY KOSTER, DIRECTOR/TREASURER	Date	
				e or print frame and title		
			Preparer's	Vi Data	Check If Prepar	rer's identifying number
	Paid		signature		self- employed > [] (see in	structions)
		arer's	Firm's name		EIN ►	
	Use	Only	yours if self-employ		LIIV	
			address, an ZIP + 4	NEW YORK, NY 10036	Phone no ► 2	12-297-0400
	May	the IF		s this return with the preparer shown above? (see instructions)	1	X Yes No
	ay			A. For Privacy Act and Pananyork Poduction Act Notice and the constate in		Form 000 (2000)

916-20

Pa	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: THE CUNY SCHOOL OF LAW FOUNDATION'S MISSION IS TO ENCOURAGE GIFTS,
	GRANTS, CONTRIBUTIONS OF REAL, INTELLECTUAL AND PERSONAL PROPERTY TO
	BENEFIT THE STUDENTS AND PROGRAMS OF CUNY SCHOOL OF LAW.
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 501(c)(4) organizations and section 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 \$ 257,610. including grants of \$ 257,610.) (Revenue \$ EDUCATION & FELLOWSHIP — CUNY LAW'S ALUMNI AND FRIENDS PROVIDE MUCH
	NEEDED SUPPORT THROUGH FINANCIAL GIVING. GIFTS TO CUNY LAW DIRECTLY
	BENEFIT OUR EXTRAORDINARY STUDENTS WHO COME TO OUR SCHOOL TO TAKE
	ADVANTAGE OF THE UNIQUE, LEGAL EDUCATION THAT WE OFFER. THE DONATIONS
	RECEIVED ARE AWARDED TO OUR STUDENTS AS SUMMER FELLOWSHIP AND BAR EXAM
	SCHOLARSHIP. 62 STUDENTS RECEIVED SCHOLARSHIPS FOR THE FISCAL YEAR
	2010.
4b	(Code.) (Expenses \$ 667,805 • Including grants of \$) (Revenue \$
70	(Code.) (Expenses \$ 667,805 • including grants of \$) (Revenue \$) COMMUNITY LEGAL RESOURCE NETWORK — THE COMMUNITY LEGAL RESOURCE NETWORK
	(CLRN), IS A COLLABORATIVE THAT SUPPORTS CUNY LAW SCHOOL GRADUATES AS
	THEY WORK TO SET UP AND RUN SOLO OR SMALL-GROUP PRACTICES DEVOTED TO
	SERVING THE PRESSING NEEDS OF THE POOR AND DISADVANTAGED IN COMMUNITIES
	THAT ARE UNDESERVED BY LAWYERS. CLRN PROVIDES LEGAL ASSISTANCE TO
	SENIORS, LOW INCOME HOUSING TENANT AND LANDLORD DISPUTES, YOUTH
	DEVELOPMENT & TRAINING AND INCUBATOR PROGRAM FOR LAW SCHOOL GRADUATES.
4c	(Code) (Expenses \$ 32,574 · including grants of \$) (Revenue \$
	IMMIGRANT INITIATIVES - THE PURPOSE OF IMMIGRANT INITIATIVES IS TO
	EXTEND THE EXPERTISE OF THE LAW SCHOOL IN THE AREA OF IMMIGRATION INTO
	UNDERSERVED COMMUNITIES IN NEW YORK AND TO PROVIDE LAW STUDENTS WITH A
	VARIETY OF MODELS FOR COMMUNITY LAWYERING. IMMIGRANT INITIATIVES HAS HOSTED EVENTS IN COMMUNITY ORGANIZATIONS,
	CUNY CAMPUSES, PUBLIC LIBRARIES AND CHURCHES, ASSISTING HUNDREDS OF LOW
	INCOME OR INDIGENT IMMIGRANT NEW YORKERS WITH COMMUNITY EDUCATION,
	APPLICATION ASSISTANCE AND DIRECT REPRESENTATION IN MATTERS OF FAMILY
	PETITIONS, ADJUSTMENT OF STATUS, NATURALIZATION, DEPORTATION DEFENSE,
	DOMESTIC VIOLENCE REMEDIES AND POLITICAL ASYLUM.
	THE PARTY OF THE P
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 72,720 • including grants of \$) (Revenue \$)
4e	Total program service expenses ►\$ 1,030,709.
	Form 990 (2009)

D	Checklist	-4 D	:	
Par IV	L.DOCKIIST	AT HA	บบเรอก 🥆	Chedilles
	OHEORHSE	01 1100	quii cu c	villeddies

			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	Ĺ.	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<u>X</u>
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 similar funds or 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		х
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		х
8				
U	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide	-		
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10		9		
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	v	
44		10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	44	Х	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11	Λ	
·	Part VI			
	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 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			
•	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 the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
10				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	40	Х	
104		12	Λ	
IZA	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 X			
10				X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	4.41.		v
15	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
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? If "Yes," complete Schedule F, Part II	45		Х
16	·	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	46		Х
47	located outside the United States? If "Yes," complete Schedule F, Part III	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47		Х
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
18	1c and 8a? If "Yes," complete Schedule G, Part II	40		X
10		18		Α.
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
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Form 990 (2009)

Part IV Checklist of Required Schedules (continued)

			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 27 If "Yes," complete Schedule I, Parts I and III	22	X	ļ
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	L
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	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 to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			l
	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	·		. <i>.</i>
	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, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			,,
	Schedule L, Part III	27		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)			v
		28a		X
		28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	00-		X
00	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		Α.
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Х
24	Did the organization liquidate, terminate, or dissolve and cease operations?	30	-	1
31	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		1
32	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?	00		
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<u> </u>		
00	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	-		
-	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	"		<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			<u> </u>
	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
			990	(2009)

Form 990 (2009)

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			
	U.S. Information Returns. Enter -0- if not applicable	ļ		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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	}		
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 instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	.	<u>X</u>
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 authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ļ	X
þ	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 Bank and			
	Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b		_X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
•	Tax Shelter Transaction?	_5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		Х
L	any contributions that were not tax deductible?	6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	UD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	ĺ	•	
_	provided to the payor?	7a	l .	х
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	l 		
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	90	_	
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)]		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		Form	ggn	(2009)

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Form 990 (2009)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

Sec	tion A. Governing Body and Management			
			Yes	Νo
1a				
b	Enter the number of voting members that are independent 1b 13			
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		_ <u>X</u> _
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	_		v
	governing body?	7a	-	<u>X</u>
b		7b	:	<u></u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following		v	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		· ·	
		10.	Yes	No_X
	Does the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	406		
	and branches to ensure their operations are consistent with those of the organization?	10b	Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Λ	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	124	7.	
D	to conflicts?	12b	х	
С	The second secon			
	in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	}		
	ın joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NY			
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. X 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, as	nd fina	incial	
. •	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 organiza	tion: 🕨		
	JANET OSHINAYA - 718-340-4314 65-21 MAIN STREET, ROOM 205G, FLUSHING, NY 11367			
	OS 21 IEIN DIRECTI ROOM 2036, I HOUMING, MI 11307	Form	990 (20007
		1 01111	フプレー	40031

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Form 990 (2009)

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

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

Employees, and Independent Contractors

- 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					
X Check this box if the organization did not	compensate ar	ny current officer, directo	r, or trustee		
(A)	(B)	(C)	(D)	(E)	(F)
Name and Title	Average	Position	Reportable	Reportable	Estimated
	hours	(check all that apply)	compensation	compensation	amount of
	per	<u>a</u>	from	from related	other

	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustæ	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ANTHONY GENTILE	1									
DIRECTOR	0.50	Х	ļ					0.	0.	0.
ANTHONY ROSSABI					ŀ					
DIRECTOR	0.50	X						0.	0.	0.
ARTHUR AIDALA	j						1			1
DIRECTOR	0.50	X						0.	0.	0.
BRIAN O'DWYER										
DIRECTOR	0.50	X					<u></u>	0.	0.	0.
CAITLIN BORGMAN			1		ŀ			_		
DIRECTOR	0.50	X	_			ļ	<u> </u>	0.	97,625.	32,216.
GREGORY KOSTER	2 52	١]		150 555	
DIRECTOR/TREASURER	0.50	X	ļ	X		ļ	<u> </u>	0.	170,777.	56,356.
JULIE RIKELMAN	0.50	l								
DIRECTOR	0.50	X					<u> </u>	0.	0.	0.
KATHERINE HUANG	0.50						1		_	•
DIRECTOR	0.50	X	<u> </u>		ļ	ļ		0.	0.	0.
KITTY BATEMAN	0.50	,							_	•
DIRECTOR	0.50	X		_		<u> </u>	-	0.	0.	0.
LAURA KOTKIN	40.00	,		,,					104 620	24 527
EXECUTIVE DIRECTOR LINDA DARDIS	40.00	A	-	X		<u> </u>	<u> </u>	0.	104,628.	34,527.
DIRECTOR	0.50	l.						0.	0.	^
LUISA HAGEMEIER	0.30	<u> ^</u>	<u> </u>			┢		0.	U •	0.
DIRECTOR	0.50	l,					ŀ	0.	0.	0.
MARNIE BERK	0.50	<u> ^</u>			-	├	┢		· ·	<u> </u>
DIRECTOR	0.50	v						0.	0.	0.
MICHAEL RIPS	0.50	^		_	-	-	-	<u> </u>	0.	0.
DIRECTOR	0.50	V.						0.	0.	0.
MICHELLE ANDERSON	0.50	<u>^</u>				\vdash	\vdash			<u> </u>
DIRECTOR	0.50	×					ļ	0.	240,173.	79,257.
PAULA BOSCO	0.30	<u> </u>		_		╁	 -	 	240/1/31	151251.
CHAIR/DIRECTOR	0.50	$ _{\mathbf{x}} $		Х				0.	0.	0.
STEVEN B ROSENFELD ESQ	1.50	† <u></u>	H	<u> </u>		 	\vdash	 	0.	
DIRECTOR	0.50	$ \mathbf{x} $						0.	0.	0.
										

932007 02-04-10

Form 990 (2009)

Form 990 (2009) SCHOOL OI						_		-		<u> 23534</u>	9	Page 8
Part VII Section A. Officers, Directors, Tru	stees, Key E	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)			
(A) Name and title	(B) Average			(O Pos	C) sitior	ı		(D) Reportable	(E) Reportable		(F) Estima	
	hours per	1	heck	(all	that	app	y) T	compensation	compensation from related		amoun othe	
	week	Inector						the	organization		ompens	
		8e or d	trustee			nSafed		organization	(W-2/1099-MIS		from t	
		of trust	멸		98	omog		(W-2/1099-MISC)		l l	rganıza and rela	
		individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former			I	rganiza	
JANET OSHINAYA		 	_		<u>-</u>	- 0	_					
DIRECTOR	10.00	-			-	Х		0.	124,28	38.	41,	015
		_							. == -			
			_			<u> </u>						
									:_			
										+		
		ļ										
				<u> </u>	<u> </u>			0.	737,49	1 2	43,3	771
1b Total2 Total number of individuals (including but n	ot limited to th	2000	liete	nd al			20.5		•		43,.	3/1.
compensation from the organization	or inflited to th		iiste	o ai	DOV	C) WI	10 10	eceived more than \$100		= 		(
3 Did the organization list any former officer,	director or tru	etoo	, ko		مامد	V00	ar b	alghant companyated or	malayoo oo		Yes	No
line 1a? If "Yes," complete Schedule J for si			, Ke	y en	ibio	уее,	OI I	lighest compensated en	npioyee on	3		x
4 For any individual listed on line 1a, is the su									the organization			
and related organizations greater than \$150Did any person listed on line 1a receive or a									ices rendered to	4	X	-
the organization? If "Yes," complete Schedusetion B. Independent Contractors										5		X
Complete this table for your five highest contactors	mpensated in	depe	ende	nt c	ontr	racto	ors t	that received more than	\$100,000 of com	pensatio	n from	
the organization. NONE								(B)			<u>(C)</u>	
Name and business	address						_	Description of s	ervices		(C) pensati	on
								-				
							\dashv		-			
	-						_					
							_					
	 .											
Total number of independent contractors (ii \$100,000 in compensation from the organize		ot III	mite	d to		se li: ()	sted	above) who received m	ore than			

Pa	rt V	Ш	Statement of Reve	nue						
							(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 st	1 8	а	Federated campaigns		1a					
P P		Ь	Membership dues		1b					
s, c		С	Fundraising events		1c]			
gift ar	•	d	Related organizations		1d	75,000.				
S. III.	•	е	Government grants (contribut	tions)	1e	504,674.				
i s	1	f	All other contributions, gifts, gran	its, and						
혈			similar amounts not included abo	ve	1f	547,209.				
Contributions, gifts, grants and other similar amounts	ç	g	Noncash contributions included in lines	s 1a-1f \$						
<u>ة ن</u>	ı	h	Total. Add lines 1a-1f			<u> </u>	1126883.			
						Business Code				
9	2 6	а								
e Z	ŧ	b						_		
ent ent	•	С								
e J	•	d								
Program Service Revenue	•	е								
۱ ۵	1	f	All other program service reve	enue						
\rightarrow	9	9	Total. Add lines 2a-2f							
	3		Investment income (including	dividend	ls, inter	est, and	0 000			0 000
			other similar amounts)			>	8,909.			8,909.
	4		Income from investment of ta	x-exempt	bond p	proceeds			<u> </u>	
	5		Royalties			▶		- · · -		
				(i) F	Real	(II) Personal				
			Gross Rents		 -		4			
			Less. rental expenses	<u> </u>						
			Rental income or (loss)	L			-			
			Net rental income or (loss)							
	/ 6	а	Gross amount from sales of	(i) Sec	<u>urities</u> 026.	(II) Other				
			assets other than inventory	338	020.					
		D	Less cost or other basis and sales expenses	552	335.					
		_	Gain or (loss)		$\frac{533.}{691.}$					
			Net gain or (loss)		0,1.	•	5,691.			5,691.
_			Gross income from fundraisin	o evente	Inot		3,051.	·		3,051.
ng	0.		including \$							
Ş			contributions reported on line							
Œ,			Part IV, line 18	, 10,. 000	а					
ŧ	ŀ	b	Less direct expenses		b					
0			Net income or (loss) from fund	draising e	vents	•			,	
Other Revenue			Gross income from gaming a							
			Part IV, line 19		а					
	ŧ	b	Less direct expenses		b					
	•	С	Net income or (loss) from gan	ning activ	ities	•				
			Gross sales of inventory, less							
-			and allowances		а					
	ı	b	Less: cost of goods sold		b					
l	(c	Net income or (loss) from sale	es of inve	ntory					
			Miscellaneous Revenu	ıe		Business Code				
	11 a	а								
	ı	b								
	(С								
	•	d	All other revenue			<u></u>				
	•	е	Total. Add lines 11a-11d			>				
0330	12		Total revenue. See instructions			<u> </u>	1141483.	0.	0.	14,600.
93200 02-04	-10									Form 990 (2009)

Part IX Statement of Functional Expenses

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

	All other organizations must compl				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Totai expenses	(B) Program service expenses	(C) ivianagement and general expenses	(D) Funoraising 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	257,610.	257,610.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members			''	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	205,877.	205,877.		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	70,597.	70,597.		
10	Payroll taxes				
11	Fees for services (non-employees)·				
a	Management				· · · · · · · · · · · · · · · · · · ·
þ	Legal	20 200	15 262	F 027	
С	Accounting	20,300.	15,263.	5,037.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	60,300.	45,337.	14 062	
9	Other	00,300.	45,337.	14,963.	
12	Advertising and promotion	7,278.	3,133.	4,145.	
13 14	Office expenses Information technology	1,210.	3,133.	4,143.	
15	Royalties				
16	Occupancy				
17	Travel	12,222.	12,222.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,340.	10,340.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,230.	4,077.	2,153.	
23	Insurance	7,776.	5,052.	2,724.	
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	CITIZENSHIP & HOUSING	348,100.	348,100.		
b	STUDENT ACTIVITIES	25,569.	25,569.		
С	STAFF DEV. & RELATIONS	21,300.	225.	21,075.	
d	CUNY LAW SCHOOL PROMO	14,042.	14,042.		
е	FACULTY DEVELOPMENT	13,265.	13,265.		
f	All other expenses	555.	1 020 700	555.	
25	Total functional expenses Add lines 1 through 24f	1,081,361.	1,030,709.	50,652.	0.
26	Joint costs. Check here				
	SOP 98-2 Complete this line only if the organization	1]		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation			L	Form 990 (2009)

08130631

THE CITY UNIVERSITY OF NEW YORK 11-3235349 Page 11 Form 990 (2009) SCHOOL OF LAW FOUNDATION INC. Part X Balance Sheet (A) Beginning of year End of year 134,334. 135,660. 1 Cash · non-interest-bearing 265,966. 825,172. 2 2 Savings and temporary cash investments 524,379. 475,828. 3 Pledges and grants receivable, net 292,379. 383,219. 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L 7 Notes and loans receivable, net Assets Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 144,718. 10a basis Complete Part VI of Schedule D 127,487. 23,461. 17,231. 10c b Less accumulated depreciation 10b 6,054. Investments · publicly traded securities 11 11 690,416. 155,674. 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 1,992,784. 1,936,989. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 20,000. 42,445. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 -iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 45,562. 55**,**070. 25 25 Other liabilities Complete Part X of Schedule D

> 1,992,784. Form 990 (2009)

1,917,714.

75,070.

727,983.

804,564.

385,167.

26

27

28

29

31

33

Net Assets or Fund Balances

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

Organizations that follow SFAS 117, check here 🕨 🗓 and complete

Organizations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 88,007.

571,950.

891,865.

385,167.

1,848,982.

1,936,989.

26

27

28

29

30 31

32

33

34

			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		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	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			ĺ
	consolidated basis, separate basis, or both			1
	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			ĺ
	Act and OMB Circular A-133?	3a		X
ь	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.	3ь		

SCHEDULE A

(Form'990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of t	he organizat	ion THE CIT	Y UNIVERSITY	OF N	IEW YO	RK		E	Employer id	dentificati	on nu	mber
_			OF LAW FOUND							-3235	349	
Part I	Reason	for Public Char	ity Status (All organi	zations mu	ist complet	te this par	t) See ins	tructions.	,			
The organ	ization is not a	private foundation	because it is (For lines	1 through	11, check	only one l	oox)					
1 🔲			s, or association of chui			-	-).				
2			'0(b)(1)(A)(ii). (Attach So									
з 🔲			tal service organization			170(b)(1)	(A)(iii).					
4			operated in conjunction					(b)(1)(A)(i	iii). Enter th	e hospital	s nam	ıe.
	city, and stat		•		•				, =			,
5 X	-		benefit of a college or u	niversity o	wned or or	perated by	a governi	mental un	nit describe	d in		
		(b)(1)(A)(iv). (Comple		•	•	•						
6			ent or governmental un	ıt describe	d in sectio	n 170(b)(1)(A)(v).					
7 🗔			eives a substantial part					or from the	e general p	ublic desci	ıbed ı	n
		b)(1)(A)(vi). (Comple				3			- 3			
8			ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9			eives. (1) more than 33			rom contr	ibutions, n	nembersh	up fees, and	d aross rea	eints	from
			nctions - subject to certa									
			axable income (less sec							-		
		509(a)(2). (Complete			-,			,o o.g			o, 10.	0.
10		•	perated exclusively to te	est for publ	lic safety S	See sectio	on 509(a)(4	I).				
11		•	perated exclusively for the	•	•			•	ry out the c	urposes o	f one	or
			ations described in secti		-							•
			organization and compl				,		(-/(-/-			
	а 🔲 Туре		-		e III · Func		tegrated		a [Type III · C	ther	
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other tha					'n							
			han one or more publicl									
f			ten determination from						- (-/(-/		(-)(-)	
		rganization, check th				, . , ,	,,					
9	Since August	t 17, 2006, has the c	organization accepted a	ny gift or c	ontribution	from any	of the follo	owing pei	rsons?			
J			rectly controls, either a								Yes	No
			upported organization?	_		•		,,,,	(,	11g(i)		
		-	n described in (i) above?	,						11g(iı)		
	-	-	person described in (i)		e?				11g(iii)			
h	_		about the supported or									
		•	• •	•	\- /							
(ı) Name	of supported	(ii) FIN	(iii) Type of	(iv) Is the o	organization	(v) Did vo	u notify the	(vi) l	s the	(vii) Am	ount o	 -
• •	organization (ii) Eliv organization		in col (i) listed in your organization in col (i) organ			organizáti (i) organi	ion in col	(vii) Amount of support				
- 3		ļ	(described on lines 1-9 above or IRC section	governing	document?			('', 0.900		oup,	,,,,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
								-				
								1				
							L		1 1			
						-		l				
								<u> </u>				
]							
				 	ļ		<u> </u>	ļ	1			
Total		<u> </u>		1			<u> </u>					

LHA 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

Schedule A (Form 990 or 990 EZ) 2009 SCHOOL OF LAW FOUNDATION INC.

| Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I)		<u> </u>		
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(P) 500ê	(c) 2007	(d) 2008	(e) 2009	(î) Totai
1 Gifts, grants, contributions, and						
membership fees received. (Do not	042 267	000 710	001 660			
include any "unusual grants.")	842,267.	980,719.	891,660.	1,641,141.	1,126,883.	5,482,670
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to	170 000	246 100	252 252	405 065	411 004	
the organization without charge		246,109.			411,904.	1,516,028
4 Total. Add lines 1 through 3	1,022,067.	1,226,828.	1,144,010.	2,067,006.	1,538,787.	6,998,698
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)						64,170
6 Public support. Subtract line 5 from line 4						6,934,528
Section B. Total Support	Y	,				
Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	1,022,067.	1,226,828.	1,144,010.	2,067,006.	1,538,787.	6,998,698
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources	33,782.	41,668.	41,964.	20,751.	8,909.	147,074
9 Net income from unrelated business						-
activities, whether or not the						
business is regularly carried on						
10 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						7,145,772
12 Gross receipts from related activities,	etc (see instruction	ons)			12	_
13 First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
organization, check this box and stop						▶□
Section C. Computation of Publ	ic Support Pe	rcentage				 .
14 Public support percentage for 2009 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	97.04
15 Public support percentage from 2008	Schedule A, Part	II, line 14			15	96.25
16a 33 1/3% support test - 2009. If the o	rganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	c and
stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright X$
b 33 1/3% support test - 2008. If the o	rganization did not	check a box on li	ne 13 or 16a, and l	ine 15 is 33 1/3%	or more, check thi	s box
and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶
17a 10% -facts-and-circumstances tes	t - 2009. If the orga	anization did not ch	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Par	t IV how the organ	ızatıon
meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a j	oublicly supported	organization	·	▶
b 10% -facts-and-circumstances tes	t - 2008 .If the orga	anization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
more, and if the organization meets the						
organization meets the "facts-and-circ				· ·		▶□
18 Private foundation. If the organization						

Pa	rt III Support Schedule for C	Organizations	Described in	Section 509(a	(Complete only	ıf you checked the b	ox on line 9 of Part I)
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and			[1	
	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 bus-	ļ					
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and				1		
	3 received from disqualified persons				·		
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
_8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support				·		
Cal	endar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	!			:		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						<u>▶</u>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2009 (line 8, column (f) d	ivided by line 13, o	column (f))		15	%
16	Public support percentage from 2008	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage		<u> </u>	<u> </u>	
17	Investment income percentage for 20)09 (line 10c, colur	mn (f) divided by lii	ne 13, column (f))		17	%
18	Investment income percentage from	2008 Schedule A,	Part III, line 17			18	%
19	33 1/3% support tests - 2009. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line 1	17 is not
	more than 33 1/3%, check this box a	nd stop here . The	organization quali	fies as a publicly s	supported organiz	ation	ightharpoons
ŀ	33 1/3% support tests - 2008. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and st	op here. The orga	nization qualifies	as a publicly supp	orted organization	▶ 🛄
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	<u>▶</u> □
					Sc	hedule A (Form 99	0 or 990-EZ) 2009

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.

OMB No 1545-0047
2009
Open to Public Inspection

Name of the organization

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

Employer identification number 11–3235349

Par	TI Organizations Maintaining Donor Advise	· · · · · · · · · · · · · · · · · · ·	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(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 advisors in v	writing that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	e used only
	for charitable purposes and not for the benefit of the donor o	· •	•
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No
Par		janization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an h	istorically important land area
	Protection of natural habitat	· —	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	led 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, handling of	•
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
,	conservation easements.		
Pa	t III Organizations Maintaining Collections of	•	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and l	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these i	tems	
Ь	If the organization elected, as permitted under SFAS 116, to	·	•
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	ce, 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		
2	If the organization received or held works of art, historical treatment		al gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
Ь	Assets included in Form 990, Part X		▶ \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

		OF LAW FOU	NDATION I	IVC .		11-3	0233343	Page Z
Pa	rt III Organizations Maintaining C	Collections of A	rt, Historical 1	Treasures,	or Other	Similar As	sets (contil	nued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of th	e following th	at are a sign	ificant use of	its collection	items
	(check all that apply)							
а	Public exhibition	d	Loan or ex	xchange progi	rams			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they further	r the organizat	tion's exemp	t purpose in F	art XIV	
5	During the year, did the organization solicit of	r receive donations	of art, historical tre	easures, or oth	her sımılar as	ssets		
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's	collection?		ĺ	Yes	☐ No
Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if organization	answered 'Ye	es" to Form 9	990, Part IV, lii	ne 9, or	
	reported an amount on Form 990, Pa		-					
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for contributi	ons or other a	ssets not inc	cluded		
	on Form 990, Part X?		•			1	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table					
			g				Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					11		
2a	Did the organization include an amount on Fe	orm 990 Part X line	212				Yes	□ No
	If "Yes," explain the arrangement in Part XIV	om oo, ran A, iile	21:			·	163	
Par	······································	f the organization an	swered "Yes" to F	orm 990 Parl	t IV line 10			
	1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1	(a) Current year	(b) Prior year	(c) Two year		Three years ba	ok (a) Four	years back
10	Beginning of year balance	384,271.	385,167		115 Dack (U)	Tillee years ba	CK (e) Four	years back
1a		304/2711	303/107	•				
0	Contributions	6,516.	-896	-				·····
	Net investment earnings, gains, and losses	0,510.	-030	•				
	Grants or scholarships					·····		
е	Other expenditures for facilities	5 620						
	and programs	5,620.						
1	Administrative expenses	205 167	204 271					
9	End of year balance	385,167.	384,271	•				
2	Provide the estimated percentage of the year	r end balance held a	s:					
а	Board designated or quasi-endowment		_%					
	Permanent endowment ► 100.00	%						
_		%						
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administe	ered for the	organization	_	
	by.							Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(II), are the related organizations						3b	
4	Describe in Part XIV the intended uses of the							
Par	t VI Investments - Land, Building	s, and Equipme	ent. See Form 99	0, Part X, line	10.		· · ·	
	Description of investment	(a) Cost or of basis (investing	' '	st or other s (other)	1 ''	ımulated cıatıon	(d) Book	value
1a	Land							
b	Buildings							
	Leasehold improvements							
	Equipment			43,786.	3	3,437.	10	,349.
	Other			00,932.		4,050.		882.
	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	•			_		,231.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. Sec	e Form 990, Part X, lin	e 12.		020015 ago @
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua	
Financial derivatives				
Closely-held equity interests				
Other	155 67	4 500 00 11	TAR MARKET	
CUNY INVESTMENT POOL	155,67	4. END-OF-Y	EAR MARKET	VALUE

				······································
Total (Col (b) must equal Form 990, Part X, col (B) line 12)	155,67			
Part VIII Investments - Program Related. Se	ee Form 990, Part X, Iir	ne 13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
			St of end-of-year mar	
.,				
				· · · · · · · · · · · · · · · · · · ·
				 ,
	(a			· · · · · · · · · · · · · · · · · · ·
				·····
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ► Part IX Other Assets. See Form 990, Part X, line	15			
<u> </u>	Description	***		(b) Book value
				(4) 2 3 3 1 1 1 1 1 1
	····-			
				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)			
Part X Other Liabilities. See Form 990, Part X, I				<u> </u>
1 (a) Description of liability		(b) Amount		- 17 \
Federal income taxes				
DUE TO RELATED PARTY		55,070.		
			ļ	
			ļ	
			{	
			{	
		•	{	
			†	
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	55,070.	1	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

932053 02-01-10

	dule D (Form 990) 2009 SCHOOL OF LAW FOUNDATION IN					ge 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audite</u>	d Financial Sta	atemen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		1,141,48	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,081,36	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		60,12	
4	Net unrealized gains (losses) on investments		4		8,61	LO.
5	Donated services and use of facilities		5	-		
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net). Add lines 4 through 8		9		8,61	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19	10		68,73	$\overline{32}$.
	t XII Reconciliation of Revenue per Audited Financial Statemer		h Revenue pe	r Returr		
1	Total revenue, gains, and other support per audited financial statements			1	1,561,99	77.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a	8,61	0.		
b	Donated services and use of facilities	2b	411,90			
c	Recoveries of prior year grants	2c	111,70			
	Other (Describe in Part XIV)	2d		-		
d	Add lines 2a through 2d	20		2e	420.51	4
e	-			3	420,51 1,141,48	1
3	Subtract line 2e from line 1			3	1,141,40	<u>,,,</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				Λ
С	Add lines 4a and 4b			4c	1 1 1 1 1 1 (
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		Ale Francisco	5	1,141,48	53.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	tn Expenses p			
1	Total expenses and losses per audited financial statements			1	1,493,26	<u>,,,</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1	411 00	.		
а	Donated services and use of facilities	2a	411,90	4.		
Ь	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d			2e	411,90 1,081,36)4.
3	Subtract line 2e from line 1			3	1,081,36	1.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,081,36	51.
Pa	t XIV Supplemental Information					
X, lın	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comple RT V, LINE 4: THE EARNINGS GENERATED FROM E	lete this p	oart to provide any	additiona	Information	art ——
TO	FUND ORGANIZATION'S PROGRAMS.					

ջ Schedule I (Form 990) 2009 Employer identification number 11-3235349 Open to Public OM3 No 1545-0047 Inspection (h) Purposie of grant or assistance X 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 (Form 990) if additional space is needed and address of organization (b) EIN (c) IRC section if applicable reash grant assistance or government assistance recipient that received more than \$5,000 Use Part IV and Schedule I-1 (Form 990) if additional space is needed (h) Purpose (h) Purpose or assistance or government assistance or government assistance or government assistance or government or government assistance or government assistance or government or government assistance or government or government assistance or government or government or government assistance or government or governm Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION INC. Enter total number of section 501(c)(3) and government organizations **General Information on Grants and Assistance** criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Parti Part II

11-3235349

Schedule | (Form 990) 2009 SCHOOL OF LAW FOUNDATION INC.

| Part III | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	Ċ	, , , , , , , , , , , , , , , , , , ,	c		
ocacinates.		• • • • • • • • • • • • • • • • • • • •			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	le the information	required in Part I, I	ine 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: SCHOLARSHI	PS	ARE DISTRIBUTED		IN TWO WAYS-	
A STUDENT'S	ITION BI	LL, OR AS	TUITION BILL, OR AS A DIRECT PAYMENT TO	AYMENT TO THE	
STUDENT: STUDENTS ONLY RECEIVE DIRECT		PAYMENTS FOR S	SUMMER FELLOWSHIPS,	OWSHIPS,	
WHICH ARE INTENDED TO SUPPORT STUDENT'	•	S EXPENSES (RE	(RENT, FOOD, 0	COMMUTING	
EXPENSES) DURING THE TIME THEY WORK	K AT UNPAID	AID SUMMER	INTERNSHIPS.	PS. IN THE	
CASES WHERE THESE ARE AWARDED, STUI	STUDENTS DOC	DOCUMENT THEIR	IR PROJECTED	ED LIVING	
EXPENSES FOR THE SUMMER AND ALSO CO	COMPLETE	REPORTS ON	THEIR SUMMER	1ER	
INTERNSHIP WORK, WHICH IS CERTIFIED	D BY THE	OFFICE OF	STUDENT	AFFAIRS.	

Schedule I (Form 990) 2009

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

2009

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

► Attach to Form 990. ► See separate instructions.

THE CITY UNIVERSITY OF NEW YORK

SCHOOL OF LAW FOUNDATION INC.

Employer identification number 11-3235349

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of.			
а	The organization?	5a		X
b	Any related organization?	5b		<u>X</u>
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a_		<u>X</u>
ь	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8_		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2009

11-3235349

Schedule J (Form 990) 2009 SCHOOL OF LAW FOUNDATION INC. 11–3235349

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(II) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	ε			0	0	łI		0
GREGORY KOSTER	Ξ	170,77		0	0	56,356.	227,133.	116,268.
	Ξ		·				- 1	0
MICHELLE ANDERSON	▣	240,17				79,257.	319,430.	167,280.
	Ξ					- 1	- 1	0
JANET OSHINAYA	▣	124,28	• 0	• 0	0	41,015.	165,303.	86,509.
	Ξ							
	Ξ							
	Ξ							
	(ii)							
	(j)							
	€							
	Θ							
	(ii)							
	Θ							
	Ξ							
	Θ							
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	Ξ							
	▣							
	ε							
	▣							
	Ξ							
	▣							
	Ξ							
	▣							

Schedule J (Form 990) 2009

SCHEDULE-O (Form 990)

Department of the Treasury

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

Name of the organization

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

Employer identification number 11-3235349

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
SUPPORT THE EDUCATIONAL NEEDS OF CUNY LAW SCHOOL THROUGH SPI	ECIAL
ACADEMIC PROGRAMS AND OTHER ACTIVITIES; SCHOOL AND FACULTY	DEVELOPMENT
EXPENSES \$ 72720. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
FORM 990, PART VI, SECTION B, LINE 11: BEFORE FORM 990 IS F	ILED, IT IS
REVIEWED BY THE FINANCE DEPARTMENT AND IT IS PRESENTED TO THE	HE BOARD BY THE
TREASURER, WHO LEADS THE BOARD THROUGH A REVIEW OF THE DOCUM	MENT.
FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INT	EREST POLICY IS
DISTRIBUTED ANNUALLY AND BOARD MEMBERS ARE REQUIRED TO READ	AND COMPLETE A
CONFLICT OF INTEREST QUESTIONNAIRE THAT IS ATTACHED TO THE	CONFLICT OF
INTEREST POLICY.	
FORM 990, PART VI, SECTION C, LINE 19: INSPECTION IS MADE A	VAILABLE UPON
REQUEST THROUGH THE DEVELOPMENT OFFICE.	
FORM 990, PART XI, LINE 2C	
THE OVERSIGHT & SELECTION PROCESS HAS NOT BEEN CHANGED FROM	PRIOR
YEARS.	
FORM 990, PART V, LINE 2A AND PART IX LINE 7	
THE ORGANIZATION DOES NOT HAVE ANY EMPLOYEES AND DOES NOT PA	AY ANY
SALARIES. THE SALARIES EXPENSE OF \$205,877 REPRESENT FUNDS	GRANTED TO
REASEARCH FOUNDATION OF CUNY TO ADMINISTER AND PAY SALARIES	OF CLRN, A
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10	Schedule O (Form 990) 2009

SCHEDULE C

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.

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service	Attach to Form 990.	Inspection
Name of the organization	THE CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION INC.	Employer identification number 11-3235349
PROGRAM OF THE	CUNY SCHOOL OF LAW.	
		

Employer identification number 11-3235349Schedule R (Form 990) 2009 2009 . Olyen to Public OMB No 1545-0047 Inspection Direct controlling Direct controlling entity ent ty Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exem or organizations during the tax year.) End-of-year assets status (if section Public charity 501(c)(3)) ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income Exempt Code section Û 501(C)(3) চ ▶ See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete of the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or Legal domicile (state or foreign country) foreign country) NEW YORK LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. UNIVERSITY OF NEW YORK ► Attach to Form 990. SCHOOL OF LAW FOUNDATION INC. Primary activity Primary activity LAW SCHOOL 13-3893536, 535 EAST 80TH STREET, NEW YORK THE CITY UNIVERSITY OF NEW YORK LAW Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R 10075 (Form 990) Part II Parl

932161 02-04-10

THE CITY UNIVERSITY OF NEW YORK

SCHOOL OF LAW FOUNDATION INC. Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more re ated organizations treated as a partnership during the tax year) Part III

Page 2

11-3235349

General ormanaging partner? Yes No 9 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V-UBI amount in box me 20 of Schedule 4.4 (Form 1065) Ξ ate allccations? Disproportion-Yes No Ξ Share of end-of-year assets 6 Share of total Income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Direct controlling entity Ð Legal domicile (state or foreign country) O Primary activity 9 Name, address, and EIN of related organization <u>e</u> Part IV

	ļ	age hip							1	
	Ē	Percentage ownership								
	ı	Share of end-of-year assets								
	(4)	Share of total income								
	(e)	Type of entity (C corp, S corp, or trust)				 				
	(p)	Direct controlling Type of entity Si entity (C corp., S corp., or trust)								
	(0)	Legal domicile (state or foreign country)								
3al .)	(q)	Primary activity								
organizations treated as a corporation of trust during the tax year.	(a)	Name, address, and EIN of related organization								

Schedule R (Form 990) 2009

932162 07-21-10

THE CITY UNIVERSITY OF NEW YORK

SCHOOL OF LAW FOUNDATION INC. Schedule R (Form 990) 2009

Page 3

11-3235349

ž

Yes

(c) Amount involved Ē 19 <u>0</u> ₽ _ ٥ ₽ 19 **1**p 10 ļ = ₽ ¥ ÷ Ξ = 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (b)
Transaction type (a-r) During the tax year, clid the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36) 33 Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) (a)
Name of other organization(s) Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule j Lease of facilities, equipment, or other assets from other organization(s) i Lease of facilities, equipment, or other assets to other organization(s) m Sharing of facilities, equipment, mailing lists, or other assets r Other transfer of cash or property from other organization(s) c Gift, grant, or capital contribution from other organization(s) q Other transfer of cash or property to other organization(s) **b** Gift, grant, or capital contribution to other organization(s) Reimbursement paid by other organization for expenses Reimbursement paid to other organization for expenses d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) Purchase of assets from other organization(s) Sale of assets to other organization(s) Sharing of paid employees Exchange of assets Part V 6 £ 0 3 ପ୍ର **3** ত্র 티

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Schedule R (Form 990) 2009

932163 02-04-10

THE CITY UNIVERSITY OF NEW YORK

SCHOOL OF LAW FOUNDATION INC.

Schedule R (Form 990) 2009

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11-3235349

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

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

General or managing partner? Yes No Code V-UBI amount in box 20 of Schedule K·1 -(Form 1065) <u>6</u> Dispropor-tionate allocations? Yes Share of end-of-year assets <u>e</u> Are all partners section 501(c)(3) organizations? Yes € Legal domicile (state or foreign country) Primary activity Name, address, and EIN of entity

34

Schedule R (Form 990) 2009

Depreciation and Amortization (Including Information on Listed Property)

Sequence No 67

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► See separate instructions.

► Attach to your tax return. Business or activity to which this form related

ដៃចំរេចរំទូរល្វេ number

THE CI	TY	UNIVE	ERSITY	OF	NEW	YORK
SCHOOL	OF	LAW	FOUNDA	TI	II NO	1C.

FORM 990 PAGE 10

990

11-3235349

08130631

Part	Election To Expense Certain Proper	ty Under Section 1	79 Note If yo	ou have any lis	ted prope	rty, c	omplete Part	V before y	ou complete Part I
1 Ma	aximum amount. See the instructions	for a higher limit	for certain b	usinesses				1	250,000.
	tal cost of section 179 property place	_						2	
	reshold cost of section 179 property	•		,				3	800,000.
	duction in limitation Subtract line 3 f			er -0-				4	
_	lar limitation for tax year Subtract line 4 from line		•		e instructions			5	
6	(a) Description of pro			(b) Cost (busin			(c) Elected	cost	
							-		

	-,		<u>.</u>						
7 Lis	sted property. Enter the amount from	line 29			7			.,	
8 To	tal elected cost of section 179 prope	rty. Add amounts	ın column (c), lines 6 and	7			8	<u> </u>
9 Te	ntative deduction Enter the smaller	of line 5 or line 8						9	
10 Ca	rryover of disallowed deduction from	10							
11 Bu	siness income limitation. Enter the si	maller of business	s income (no	t less than ze	ro) or line	5		11	
12 Se	ction 179 expense deduction. Add lii	nes 9 and 10, but	do not ente	r more than lii	ne 11			12	
13 Ca	13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12								
Note:	Do not use Part II or Part III below for	listed property. I	nstead, use	Part V.					
Part	II Special Depreciation Allowa	nce and Other D	epreciation	(Do not inclu	de listed p	rope	rty)		
14 Sp	ecial depreciation allowance for qual	ified property (oth	ner than liste	d property) pl	aced in se	ervice	during		
the	e tax year							14	
15 Pr	operty subject to section 168(f)(1) ele	ction						15	
	her depreciation (including ACRS)							16	6,230.
Part		t include listed pr	operty.) (See	e instructions)				
		•	Se	ection A	•				
17 M	ACRS deductions for assets placed in	n service in tax ve	ears beginning	na before 200	 9			17	
	ou are electing to group any assets placed in serv	Ţ.	-	•		here	▶ □	7	<u> </u>
	Section B - Assets						eral Deprecia	tion Syst	em
	(a) Classification of property	(b) Month and year placed in service	(business/i	or depreciation nvestment use instructions)	(d) Reco		(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property								
b	5-year property	1			-				
c	7-year property	1							
d	10-year property	1			 				
	15-year property	1							
<u>e</u>	20-year property	4					-		
		-{			25 yı	····	 	S/L	
g	25-year property	 					NANA		
h	Residential rental property	'			27.5		MM	S/L	<u> </u>
		 			27.5		MM	S/L	
1	Nonresidential real property	/		· · · · · ·	39 yı	rs.	MM	S/L	
	Section C - Assets P	lacadia Camina	Di 000	0 Tau Vaan II	sinn Abo A	\ 14 a ma	MM Donne	S/L	<u> </u>
		Taced in Service	During 200	9 lax fear U	sing the A	aitern	lative Deprec	1	Stem
20a	Class life	-{			10.		-	S/L	
b_	12-year	ļ			12 y		1 1414	S/L	
C D-4	40-year	/	l		40 y	rs.	MM	S/L	<u> </u>
Part			<u> </u>				_		
	sted property. Enter amount from line		. =					21	
	otal. Add amounts from line 12, lines	-			•				6 000
	ter here and on the appropriate lines	•	•	•	tions - <u>se</u> e	<u>Instr</u>	·	22	6,230.
	r assets shown above and placed in	_	e current yea	ar, enter the					
916251 11-04-0	ortion of the basis attributable to sect				2	3			
	LHA For Paperwork Reduction	Act Notice, see	separate in	structions.					Form 4562 (2009)

Form 4562 (2009)

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment,

recreation, or amusement.)

Note: For any vehicle for wh

	through (c) of	Section A, ali	I of Section B,	and Sec	tion C i	f applica	ble			_					1113 (a)	
			ion and Other		<u>-</u> _	aution:	See the	instruc	ctions for l	mits for	passeng	ger autoi	nobiles)			
24 a	Do you have evidence to	support the bu	ısıness/investm	ent use cla	aimed?	Y	es 🗀	No	24b If "Y	es, is t	he evide	nce writ	ten?	J Yes [No	
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percenta	t of	(d) Cost or her basis	(bu	(e) sis for depr siness/inve use only	estment	(f) Recovery period	(g) Method/ Convention		(h) Depreciation deduction		Ele- section	(i) Elected section 179	
25	Special depreciation all	lowance for c	qualified listed		placed	in servi	ce durin	g the t	ax year an	d	05				ost	
	used more than 50% in Property used more that										25	J		<u> </u>		
26	Property used more tha	an 50 70 iii a C	1	1								 		Т		
		<u> </u>	1	% ~								-		1		
_		 	†	% %							-			_		
27	Property used 50% or I	loce in a qual							L.,					<u> </u>		
	Froperty used 30 % or i	less III a quai		%		ı				S/L·		1		Τ		
		 		%						S/L·	•			1		
_		· · ·	1	%		-			-	S/L·		 		1		
20	Add amounts in column		1				2222 1		1	3/L ·	28	<u> </u>		-{		
	Add amounts in column						, page 1				_ 20	<u> </u>	29	 		
29	Add amounts in column	11 (I), III1e 20 E		Section I			on Hea	of Val	nielos	••			29			
lf y	mplete this section for vi ou provided vehicles to se vehicles			er the qu		in Secti				an exce	•	complet	ing this :			
30	Total business/investment	miles driven d	turing the	I	ncle		hicle	١,	/ehicle		hicle	1		(f) Vehicle		
50	year (do not include com		Juling the	¥01	11010	701	ilicio	 	remote	70	incie	Vehicle		venicie		
31	Total commuting miles	• .	n the vear			T								 		
	Total other personal (no	_	-									 				
U L	driven	oncommuni	g/ 11111C3													
33	Total miles driven durin	o the vear						<u> </u>				<u> </u>				
-	Add lines 30 through 33															
34	Was the vehicle availab		nal use	Yes	No	Yes	No	Yes	. No	Yes	No	Yes	No	Yes	No	
•	during off-duty hours?										110 103 110					
35	Was the vehicle used p	orimarily by a	more													
	than 5% owner or relat	ed person?					1									
36	Is another vehicle availa	able for perso	onal													
	use?	•					1					j				
		Section C	- Questions	for Empl	loyers V	Vho Pro	vide Ve	hicles	for Use b	y Their	Employ	ees				
	swer these questions to ners or related persons	determine if	you meet an e	exception	to com	pleting	Section	B for v	ehicles us	ed by e	mployee	s who a	re not n	nore than	15%	
37	Do you maintain a writt employees?	en policy sta	tement that p	rohibits a	all perso	nal use	of vehicl	es, inc	luding cor	nmuting	, by you	r		Yes	No	
38	Do you maintain a writt	en policy sta	itement that p	rohibits p	personal	l use of v	vehicles,	excep	ot commut	ing, by	your				1	
	employees? See the in:	structions foi	r vehicles use	d by corp	orate o	fficers, c	directors	, or 19	6 or more	owners						
39	Do you treat all use of	vehicles by e	mployees as p	personal	use?											
40	Do you provide more th	nan five vehic	cles to your en	nployees	, obtain	ınforma	tion fron	ı your	employee	s about						
	the use of the vehicles,	, and retain th	he information	received	12											
41	Do you meet the requir	ements conc	erning qualifie	ed autom	obile de	emonstra	ation use	?							<u> </u>	
_	Note: If your answer to	<i>37, 38, 39, 4</i>	<u>10, or 41 is "Ye</u>	es," do no	ot comp	lete Sec	tion B fo	or the o	covered ve	hicles					<u> </u>	
P	art VI Amortization															
	(a) Description	of costs	Cat	(b) e amortization begins		(C) Amortiza amoun	ble t		(d) Code section	e Amortization		A f	(f) Amortization for this year			
42	Amortization of costs ti	hat begins di	uring your 200	9 tax yea	ar:											
_																
												\Box				
43	Amortization of costs ti	hat began be	efore your 200	9 tax yea	ır							43				
44	Total. Add amounts in	column (f) S	ee the instruc	tions for	where t	o report						44				

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you a	re filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ LXJ
-	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		
Do not c	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	m 8868
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		· · · · · · · · ·
•			
-	tion required to file Form 990-T and requesting an automatic 6-month extension · check this box and corr	plete	<u> </u>
Part I onl	· · · · · · · · · · · · · · · · · · ·		-
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ome tax returns.	exten	sion of time
noted bel (not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (ow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file ov/efile and click on e-file for Charities & Nonprofits	cally if	(1) you want the additional ated Form 990-T. Instead,
Type or	Name of Exempt Organization	Empl	oyer identification number
orint	THE CITY UNIVERSITY OF NEW YORK SCHOOL		
	OF LAW	1	<u>1-323</u> 5349
file by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions 65-21 MAIN ST.	_	
return See Instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FLUSHING, NY 11367		
Check ty	pe of return to be filed(file a separate application for each return):		
X For		27 169	
Teleph If the	LAURA KOTKIN books are in the care of 65-21 MAIN STREET, ROOM 2002 - FLUSHING from No (718)340-4483 FAX No borganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of all	 is is fo	
is f	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt FEBRUARY 15, 2011 , to file the exempt organization return for the organization named a corporation or the organization's return for: calendar year		The extension
2 If t	nis tax year is for less than 12 months, check reason.		Change in accounting period
	ns application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		_
_	nrefundable credits. See instructions	3a_	\$
	ns application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	payments made Include any prior year overpayment allowed as a credit.	3ь	\$
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	<u> </u>	37/3
Se	e instructions.	3c	s N/A
Caution	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment instructions
		33, 3	
LHA I	or Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev. 4-2009