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DLN: 93493195000281

Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 09-01-2009 and ending 08-31-2010 A For the 2009 D Employer identification number B Check if applicable TEACHERS COLLEGE COLUMBIA UNIVERSITY use IRS Address change 13-1624202 label or Doing Business As E Telephone number print or Name change type. See Specific (212) 678-3016 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-G Gross receipts \$ 276,209,867 525 W 120TH ST BOX 30 Terminated tions. City or town, state or country, and ZIP + 4 NEW YORK, NY 10027 Amended return Application pending Name and address of principal officer Is this a group return for HARVEY SPECTOR affiliates? 525 W 120TH ST BO X 30 NEW YORK, NY 10027 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (3) **◄** (insert no) Tax-exempt status √ 4947(a)(1) or
√ 527 Group exemption number 🕨 Website: ► www.tc.edu K Form of organization 🔽 Corporation Trust 🗆 Association 🗀 Other 🕨 M State of legal domicile NY L Year of formation 1887 Summary Briefly describe the organization's mission or most significant activities See additional information for Part I, line 1 - the College's mission and most significant activities Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. 36 3,181 Total number of employees (Part V. line 2a) . . . Total number of volunteers (estimate if necessary) . 98 -20,453 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 $\,$. -20,453 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 35,088,394 32,348,067 Program service revenue (Part VIII, line 2g) . 124,348,028 136,594,313 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -6,092,632 4,454,594 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,156,600 5,373,643 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 158,500,390 178,770,617 18,137,310 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 17.842.493 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 108.321.348 **Expenses** 111,734,281 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 30,252 219,739 Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,378,916 Ь **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 60,053,558 53,580,866 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 186,247,651 183,672,196 -27,747,261 -4,901,579 19 Revenue less expenses Subtract line 18 from line 12 . t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 365,739,917 364,963,652 Total liabilities (Part X, line 26) . . 198,637,084 193,434,280 22 167,102,833 171,529,372 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign ***** 2011-0<u>1-18</u> Here Signature of officer HARVEY SPECTOR VICE PRESIDENT FINANCE & ADMINISTRA Type or print name and title Check if Preparer's identifying number Date ELISHA RODRIGUEZ 2011-07-14 Paid empolyed 🕨 🔽 Preparer's TEACHERS COLLEGE COLUMBIA UNIVERSITY Firm's name (or yours EIN ▶ if self-employed), **Use Only** address, and ZIP + 4 525 W 120TH ST BOX 72 Phone no (212) 678-3016

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

NEW YORK, NY 100276605

Yes ┌ No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

See additional information for

	. 314. p. 25.4111 301 1100 0AP			-				Form 990 (2009)
4e	Total program service exp	enses►\$	156,184,72	 5				
4d	Other program services ((Expenses \$ 22	•	lule O) See a ding grants o			escription) (Revenue \$)
4c	AUXILIARY ENTERPRISES AUXI EXPERIENCE A MAJOR AUXILIA PRESS IS ONE OF THE OLDEST PUBLICATIONS BECAME TEACHE	RY ENTERPRISE OF TH AND MOST DISTINGUIS ERS COLLEGE PRESS, I	IE COLLEGE IS T SHED PUBLISHE TS PRIMARY PU	HE TEACHERS C RS OF EDUCATIO RPOSE HAS BEEN	E OF MEALS AN DILEGE PRESS, NAL MATERIAL TO PUBLISH V	, ESTABLISHED IN 1904 S IN THE UNITED STATE VOR	ENTS ENHANCING AS THE BUREAU	OF PUBLICATIONS, THE
4b	RESEARCH TRAINING AND PUBL PROVIDED BY THE NATIONAL SO DEPARTMENT OF EDUCATION, UNICEF, THE GE FOUNDATION	CIENCE FOUNDATION, THE NEW YORK STATE AND OTHER PUBLIC AN	THE AMERICAN DEPARTMENT (ND NON-PROFIT	FUNDED RESEAF CANCER SOCIET OF EDUCATION, 1 INSTITUTIONS	CH EXPENDITU Y, THE UNITED HE GATES FOU TC PLACES A M	O STATES DEPARTMENT JNDATION, THE LUMINA IAJOR EMPHASIS O	5 \$35 MILLION, NOF AGRICULTUF FOUNDATION, S	RE, THE U S SAY YES TO EDUCATION
4a	(Code) INSTRUCTION TEACHERS COLL AND WITHIN A SINGLE INSTITU EDUCATION, BUT ALSO ON ADU THIS VISION OF EDUCATION WI BROADLY ENABLES THE DEVELO FULL-TIME TENURE-TRACK FAC RESEARCHERS AND PRACTITIO HAVE DIRECTLY INFLUENCED N SOCIAL SERVICES, SCHOOL FIN COLLEGE'S COWIN CONFERENC HOSTING, IN RECENT YEARS, A AS WELL AS THE NATION'S FIRS ALSO WIDELY KNOWN FOR INNEDUCATION, ORGANIZATIONAL	ITION OUR NAME NOT JLT LEARNING, LEADER RIT LARGE(TODAY EME POPMENT NOT ONLY OF : CULTY INCLUDES SOME WHERS IN THEIR VARION WATIONAL LEGISLATION WANCE, NATIONAL LEAR CE CENTER HAS HELPEL A LIVE (AND NATIONAL ST RESEARCH CONFER WOVATIVE CURRICULUM	WITHSTANDING SHIP, HEALTH, I SODIED IN 60 AG INDIVIDUAL STL E OF THE MOST US FIELDS POL OR STATE LEGI NING STANDAR D PHYSICALLY E Y WEBCAST) DI ENCE DEVOTED I DEVELOPMENT	, THE COLLEGE, I PSYCHOLOGY, NL CADEMIC PROGR. IDENTS, BUT OF NATIONALLY AND ICY RESEARCH IS SLATION IN EARL DS, CHARTER SC STABLISH THE CO EBATE BETWEEN TO TO ANALYSIS OF IN ACADEMIC SI	SCIPLINES UNM FROM ITS INCE ITRITION, MOV AMS ACROSS N FAMILIES, COM INTERNATION INTERNATI	PTION HAS FOCUSED NEMENT SCIENCES, ART LINE ACADEMIC DEPARTIES AND MUNITIES, CITIES AND LETTES AND	R GRADUATE SCI IOT ONLY ON PR AND MUSIC EDI MENTS) SUPPOI NATIONS TEAC WIDELY RESPEC GROUP OF FACU TY COLLEGES, S F NATIONAL HEA DEBATES ON THE VO PRESIDENTIA STIMULUS FUND	E-K-12 CLASSROOM JCATION AND MORE RTS LEARNING THAT HERS COLLEGE'S 149 TED THINKERS, LTY MEMBERS WHO CHOOL INTEGRATION, ALTH PROGRAMS THE SE AND OTHER ISSUES, AL CANDIDATES IN 2008, S TC FACULTY ARE
4	Describe the exempt purpo Section 501(c)(3) and 501 allocations to others, the to	l (c)(4) organizatio	ns and section	on 4947(a)(1)	trusts are r	equired to report th		
	services?		· · · ·					✓ No
3	Did the organization cease		ke sıgnıfıcan	=	ow it condu	cts, any program	-	E
	If "Yes," describe these ne						,	,
2	Did the organization undert the prior Form 990 or 990-					ch were not listed o	n Yes	✓ No

Part IV	Chec	klist	of Red	auired	Sche	dule
4.11234	CHEC	RIISL '	ui ne	uun eu	30116	uules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
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	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, 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.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	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 No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
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		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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Par	t IV Checklist of Required Schedules (continued)			
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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	Yes	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			l
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		Yes	No
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 7,762			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
2-	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	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? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes	
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	Yes	
b	If "Yes," enter the name of the foreign country ▶UK, CJ, GK, JA			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	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		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Yes	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Yes	
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	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 a	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against 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			

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

Se	ection A. Governing Body and Management			
	ction At Governing body and Hanagement		Yes	No
1a	Enter the number of voting members of the governing body 1a 38			
b	Enter the number of voting members that are independent 1b 36]		
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		Νo
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		N o
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
о 7а	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)	130	163	
	11 Tes to fine a of b, describe the process in senegate of (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		Νo
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of t	he orga	nızatıor	n 🕨
	HENRY PERKOWSKI OFFICE OF THE CONTROLLER	=		

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

	raye
5,000	554,43

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►178

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
JT MEGAN & COMPANY INC 44 W 28TH ST FL 11 NEW YORK, NY 10001	Construction Services	1,544,157
STRUCTURETONE 770 BROADWAY NEW YORK, NY 10003	Construction Services	1,138,587
MDRC 16 EAST 34TH STREET 19TH FL NEW YORK, NY 10016	Education/Social Policy Research	1,082,103
CVM CONSTRUCTION MANAGERS INC 400 CRESSON BOULEVARD SUITE 300 OAKS, PA 19456	Construction Services	1,129,487
COLUMBIA UNIVERSITY 116TH AND BROADWAY NEW YORK, NY 10027	educational services	2,697,299
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►70) who received more than	

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
nts Dts	1a	Federated cam	paigns 1a					
gra	ь	Membership du	ies 1b					
E ⊞	C		ents 1c					
<u> </u>	d		zations 1d					
as, Si⊞	e	Government grant		10,250,944				ļ
달 라	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	22,097,123				
音色	g	Noncash contri	ibutions included in					
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ _	s 1a-1f	▶	32,348,067			
O @		Total. Add fille:	5 14-11	Business Code	52,5 15,55			
III e	2a	Tuition and fees		900,099	113,216,831	113,216,831		
e ve	ь	Auxiliary activity	_	900,099	13,516,187	13,516,187		
ъ П	_ c	Fees & contracts fi	rom gov agencies	900,099	8,342,764	8,342,764		
Ę	d	Subscriptions & spe		611,710	612,674	612,674		
S.	e	Curriculum Develo		611,710	191,344	191,344		
Program Service Revenue	f	-	am service revenue		714,513	714,513		
နို င	_	Total Addison	- 2- 25	<u> </u>	126 504 212	·		
<u>"</u>	g 3		s 2a-2f		136,594,313			
			aramounts)	. h	1,299,192		-20,453	1,319,645
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	9,329			9,329
	5	Royalties		• [85,521			85,521
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
			(i) Securities	(II) O ther				
	7a	Gross amount from sales of	98,792,819					
		assets other than inventory						
	ь	Less cost or other basis and	95,646,746					
		sales expenses Gain or (loss)	3,146,073					
	c d		ss)		3,146,073			3,146,073
	8a		rom fundraising		, ,			, ,
ë		events (not inc	luding					
Other Revenue		\$ of contributions	reported on line 1c)					
ě			ne 18					
<u>.</u>	١.		a					
둦	b c		penses b (loss) from fundraising	events •				
_	9a		from gaming activities	events				
			ne 19					
			а					
	b		penses b					
	10a	Gross sales of	(loss) from gaming acti	vities				
	100	returns and allo						
			а	6,557,157				
	Ь		oods sold b	1,792,504	4 764 650			4 764 650
	С	Net income or i	(loss) from sales of inv	entory 🛌 Business Code	4,764,653			4,764,653
	11a	Pool revenue	s Revenue	713,940	265,808			265,808
	ь	roorievenue		,- 10	_32,336			
	d	All other reven	ue		257,661			257,661
	e	Total. Add lines			·			·
			-	▶	523,469			
	12	Total revenue.	See Instructions .	▶	178,770,617	136,594,313	-20,453	9,848,690

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	Section 501(c)(3) and 501(c)(4) organizations m I other organizations must complete column (A) but are not required to			וח	
Do no	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	0		<u> </u>
2	Grants and other assistance to individuals in the U S See Part IV, line 22	18,137,310	18,137,310		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,988,715	1,093,883	1,156,702	738,130
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	76,794,685	65,357,107	8,560,589	2,876,989
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	12,903,980	10,500,895	1,824,093	578,992
9	Other employee benefits	12,926,493	13,703,761	979,646	-1,756,914
10	Payroll taxes	6,120,408	5,108,709	738,048	273,651
11	Fees for services (non-employees)				
а	Management	879,373	800,324	61,619	17,430
b	Legal	860,769	1,453	859,316	0
c	Accounting	264,601	7,350	257,251	0
d	Lobbying	155,706	155,706	0	0
e	Professional fundraising See Part IV, line 17	219,739			219,739
f	Investment management fees	3,093,086	0	3,093,086	0
g	Other	16,109,444	11,069,385	4,035,722	1,004,337
12	Advertising and promotion	920,847	913,346	3,575	3,926
13	Office expenses	2,045,879	2,790,501	-1,332,691	588,069
14	Information technology	1,579,745	628,395	893,902	57,448
15	Royalties	98,560	47,201	51,028	331
16	Occupancy	5,810,320	4,927,528	793,655	89,137
17	Travel	2,256,787	1,939,913	140,934	175,940
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,417,607	1,166,614	61,619	189,374
20	Interest	4,453,314	4,273,498	140,167	39,649
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,878,925	8,306,497	464,031	108,397
23 24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of	799,179	1,010	798,169	0
	total expenses shown on line 25 below)				
a	Printing and publications	947,034	817,476	12,327	117,231
Ь	Repairs & Maintenance	1,610,476	1,325,510	264,092	20,874
c	Honorariums & Awards	989,264	978,378	7,436	3,450
d	Professional development & membership fees	374,562	249,344	110,859	14,359
e •	All other expenses	25 200	1 000 601	1.966.630	10 277
f 25	All other expenses Total functional expenses Add lines 1 through 24f	35,388	1,883,631	-1,866,620	18,377
25	Total functional expenses. Add lines 1 through 24f	183,672,196	156,184,725	22,108,555	5,378,916
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
-					(A)		(B)
	Ι.				Beginning of year	_	End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments	•		11,049,332	2	8,723,069
	3	Pledges and grants receivable, net	•		9,303,767	3	9,713,849
	4	Accounts receivable, net			4,676,846	4	4,073,337
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of the complete Part II		n 4958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net		2,840,562	7	3,764,131	
	8	Inventories for sale or use			1,309,957	8	1,478,491
	9	Prepaid expenses and deferred charges			2,641,830	9	2,402,104
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	240,280,174			
	ь	Less accumulated depreciation	10b	121,127,343	122,724,537	10c	119,152,831
	11	Investments—publicly traded securities			129,657,765	11	102,962,671
	12	Investments—other securities See Part IV, line 11	73,361,323	12	106,610,348		
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			8,173,998	15	6,082,821
	16	Total assets. Add lines 1 through 15 (must equal line 34) .		365,739,917	16	364,963,652	
	17	Accounts payable and accrued expenses .			20,668,544	17	15,798,119
	18	Grants payable				18	
	19	Deferred revenue			24,010,832	19	16,442,169
_	20	Tax-exempt bond liabilities	ı		87,097,882	20	86,018,283
Səj	21	Escrow or custodial account liability Complete Part IV of Schedu	le D		492,069	21	573,362
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	,				
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	·		636,635	23	195,179
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			65,731,122	25	74,407,168
	26	Total liabilities. Add lines 17 through 25			198,637,084	26	193,434,280
- N		Organizations that follow SFAS 117, check here ▶ 🔽 and com	plete	lines 27			
<u>9</u>		through 29, and lines 33 and 34.					
<u>8</u>	27	Unrestricted net assets			81,976,664	27	86,281,511
8	28	Temporarily restricted net assets			9,579,056	28	9,127,070
Fund Balances	29	Permanently restricted net assets			75,547,113	29	76,120,791
Œ		Organizations that do not follow SFAS 117, check here ▶ ☐ a	nd cor	nplet e			
0ľ		lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for	unds		107 122 222	32	171 700 700
Net	33	Total net assets or fund balances			167,102,833		171,529,372
	34	Total liabilities and net assets/fund balances			365,739,917	34	364,963,652

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A Public Charity Status and Public Support (Form 990 or 990EZ)

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.

Inspection

Name of the organization TEACHERS COLLEGE COLUMBIA UNIVERSITY

Department of the Treasury

Internal Revenue Service

Employer identification number

Pai								•		ructions			
The c	rganı -	zation is	not a private	e foundation because	ıtıs (Forlır	nes 1 throug	h 11, check o	only one box	:)				
1	Γ	A churc	h, conventio	on of churches, or as:	sociation of d	churches se	ction 170(b)((1)(A)(i).					
2	~	A scho	ol described	ın section 170(b)(1)	(A)(ii). (Atta	ach Schedul	e E)						
3	Γ	A hosp	tal or a coop	erative hospital serv	vice organiza	tıon descrıb	ed in section	170(b)(1)(A)(iii).				
4	Γ		cal research l's name, cit	•	ed in conjunc	tion with a h	ospital descr	ibed in sect i	ion 170(b)(1)((A)(iii). Ente	r the		
5	Г	An orga	ınızatıon ope	rated for the benefit	of a college o	or university	owned or ope	erated by a	governmental	unıt describe	_ ed in		
		section	170(b)(1)(A	A)(iv). (Complete Part II)									
6	\sqcap	A feder	al, state, or l	local government or	governmenta	l unıt descri	bed in sectio i	n 170(b)(1)	(A)(v).				
7	Γ	describ	ed ın	t normally receives a A)(vi) (Complete Pa		part of its s	upport from a	governmen	tal unit or fron	n the general	public		
8	\vdash	A comn	nunity trust	described in section	170(b)(1)(A)(vi) (Comp	olete Part II))	ction 170(b)(1)(A)(iii). Enter the a governmental unit described in L)(A)(v). Intal unit or from the general public butions, membership fees, and gross and (2) no more than 331/3% of section 511 tax) from businesses rt III) 1509(a)(4). Ctions of, or to carry out the purposes of 509(a)(2) See section 509(a)(3). Chery gh 11h d d Type III - Other ly by one or more disqualified persons tions described in section 509(a)(1) or ell or Type III supporting organization of the scribed in (ii) Yes No 11g(ii) 11g(iii) 11g(iii) A mount				
9	Γ	Anorga	inization tha	t normally receives	(1) more tha	n 331/3% of	its support fr	rom contribu	ıtıons, membe	rship fees, a	nd gross		
		receipt	from activi	ties related to its ex	empt function	ns—subject	to certain exc	eptions, an	d (2) no more	than 331/3%	of		
		ıts supp	oort from gro	ss investment incom	ne and unrela	ted busines	s taxable inco	ome (less se	ection 511 tax	() from busin	esses		
		acquire	d by the org	anızatıon after June 3	30,1975 Se	e sect ion 5 0	9(a)(2). (Cor	mplete Part	III)				
its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10													
11	Γ	one or i	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h										
e	Γ	other th											
f			rganization r	eceived a written de	termination f	rom the IRS	that it is a Ty	ype I, Type	II or Type III	supporting o	organization,		
g		followin	g persons?	006, has the organiz									
				ectly or indirectly co	•			ersons desc	ribed in (ii)	44-43	Yes No		
				overning body of the			ion?				 		
		` '	•	r of a person describ	• • •								
				ed entity of a person						119(111)	<u> </u>		
h 		Provide	the followin	g information about t	ne supported	ı organizatio	n(s)						
	(i) Name uppo ganiz	e of	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove	on in ed in rning	(v) Did you notify the organization in col (i) of your support?		Is the organizati col (i) orga	on in inized	(vii) A mount of support?		
				instructions))	Yes	No	Yes	No	Yes	No			

Total

ınstructions

	Support Schedule (Complete only if y	e for Organiza	tions Describ	ed in IRC 170 7. or 8 of Part)(b)(1)(A)(iv) I.)	and 17	′0(b)(:	1)(A)(vi)	
S	ection A. Public Support			. ,	/				
	endar year (or fiscal year beginning	(-) 200F	(1) 2006	(-) 2007	(4) 2000	(-) 2		/5\ T. I	_ 1
	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	2009	(f) ⊤ot	aı
1	Gifts, grants, contributions, and								
	membership fees received (Do not	:							
	ınclude any "unusual								
	grants ")								
2	Tax revenues levied for the								
	organızatıon's benefit and either								
	paid to or expended on its								
	behalf								
3	The value of services or facilities								
	furnished by a governmental unit to)							
_	the organization without charge			+					
4	Total. Add lines 1 through 3								
5	The portion of total contributions b	У							
	each person (other than a								
	governmental unit or publicly								
	supported organization) included o	n							
	line 1 that exceeds 2% of the								
	amount shown on line 11, column								
_	(f)	_							
6	Public Support. Subtract line 5 from line 4	1							0
	ection B. Total Support							1	
	ection B. Total Support endar year (or fiscal year beginning		1	I					
Cai	, , , , , ,	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Tota	al
-	in)								
7	A mounts from line 4								
8	Gross income from interest,								
	dividends, payments received on								0
	securities loans, rents, royalties and income from similar								· ·
	sources								
9	Net income from unrelated								
9	business activities, whether or								
	not the business is regularly								
	carried on								
10	Other income (Explain in Part								
10	IV) Do not include gain or loss								
	from the sale of capital assets								
11	Total support (Add lines 7								
	through 10)								
12	Gross receipts from related activit	ies, etc (See ins	tructions)	•	•	12			
13	First Five Years If the Form 990 is	for the organizat	ion's first second	I third fourth or	fifth tay year as a		3) organ	ızatıon	
13	check this box and stop here	ior the organizat	ion's mist, second	i, tillia, louitii, oi	ilitii tax yeal as a	301(0)(.)) organi	▶ □	
	check this box and stop here							-,	
	ection C. Computation of Pu	blic Support I	Percentage						
14	Public Support Percentage for 200			11 column (f))		14			0 %
	-	•		11 column (1))					0 70
15	Public Support Percentage for 200	18 Schedule A, Pa	irt II, line 14			15			
16a	33 1/3% support test—2009. If the	e organızatıon dıd	not check the bo	x on line 13, and	line 14 is 33 1/39	% or more	, check	this box	
	and stop here. The organization qu	alıfıes as a public	ly supported orga	anızatıon				► □	
b	33 1/3% support test—2008. If the	e organızatıon dıd	not check the bo	x on line 13 or 10	6a, and line 15 is	33 1/3%	or more	, check this	
	box and stop here. The organization	n qualifies as a p	ublicly supported	organızatıon				▶ -	
17a	10%-facts-and-circumstances test	_							
	is 10% or more, and if the organiza			•		-			
	ın Part IV how the organization me	ets the "facts and	d cırcumstances"	test The organiz	zatıon qualıfıes as	a publicl	y suppo		
	organization							► □	
b	10%-facts-and-circumstances test	_							
	15 is 10% or more, and if the orga			•		-			
	Explain in Part IV how the organiza	ation meets the "1	acts and circums	tances" test The	e organızatıon qua	lifies as	a publicl		
	supported organization							▶ □	
18	Private Foundation If the organiza	tion did not check	ca box on line 13	, 16a, 16b, 17a c	or 17b, check this	box and	see		

►□

organization

Pa	(Complete only if you				(a)(2)		
Se	ction A. Public Support			•			
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,			+			
2	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513 Tax revenues levied for the						
4	organization's benefit and either						
	paid to or expended on its						
	behalf			-			
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons						
b	A mounts 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 7 c from line 6)						
Se	ction B. Total Support	1				1	
	ndar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	ın)	(4) 2003	(2) 2000	(6) 2007	(4) 2000	(0,200)	(1) otal
9	A mounts from line 6 Gross income from interest,						
10a	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
ь	sources Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
с 11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
12	business is regularly carried on Other income. Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is fo	or the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orga	
	check this box and stop here						►□
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	0 %
16	Public support percentage from 200	8 Schedule A , P	art III, line 15			16	
Se	ction D. Computation of Inve						
17	Investment income percentage for 2	009 (line 10c co	olumn (f) divided l	by line 13 colum	n (f))	17	0 %
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	. 7		18	
19a	33 1/3% support tests—2009. If the					than 33 1/3% ar	nd line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T	ne organization q	ualities as a publ	ıcıy supported		

33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493195000281

OMB No 1545-0047

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-EZ)

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

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

• Sec • Sec If the	ction 501(c)(3) organizations that ction 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, or t have filed Form 5768 (election under t have NOT filed Form 5768 (election u s," to Form 990, Part IV, Line 5 (Pre zations Complete Part III	section 501(h)) (nder section 501	Complete Part II-A Do not co (h)) Complete Part II-B Do	omplete Part Il-B not complete Part Il-A				
Naı	ne of the organization	·		Employer ide	ntıfıcatıon number				
TEA	CHERS COLLEGE COLUMBIA UNIVERSIT	Y		12 162420					
Pari	I-A Complete if the or	ganization is exempt under s	section 501(13-1624202 c) or is a section 52					
					- or gameation				
1		iption of the organization's direct and indirect political campaign activities in Part IV							
2	Political expenditures			•	\$				
3	V olunteer hours								
Par	I-B Complete if the or	ganization is exempt under s	section 501(c)(3).					
1	Enter the amount of any excise	e tax incurred by the organization und	er section 4955	. ▶	\$				
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	n 4955 🕨	\$				
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		┌ Yes				
4a	Was a correction made?				┌ Yes				
ь	If "Yes," describe in Part IV								
Par	TI-C Complete if the or	ganization is exempt under s	section 501(c) except section 50	1(c)(3).				
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities 🕨 💲								
 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities 									
4	Did the filing organization file F	Form 1120-POL for this year?			⊤ Yes				
5	were made For each organizat contributions received that we	nd employer identification number (EI ion listed, enter the amount paid from re promptly and directly delivered to nittee (PAC) If additional space is ne	i the filing organi a separate politi	zation's funds Also enter cal organization, such as a	the amount of political				
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	(election
4	Check If the filing organization belongs to	3 '		
<u>B</u>	Check I if the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying I (The term "expenditures" means a		(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	155,706	
c	Total lobbying expenditures (add lines 1a and 1	b)	155,706	
d	Other exempt purpose expenditures		164,078,597	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	164,234,303	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lu	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er - 0 -		
i	Subtract line 1f from line 1c If zero or less, ent	er - 0 -		

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total			
<u>2a</u>	Lobbying non-taxable amount		1,000,000	1,000,000	1,000,000	3,000,000			
ь —	Lobbying ceiling amount (150% of line 2a, column(e))					4,500,000			
_c	Total lobbying expenditures		124,791	160,958	155,706	441,455			
_d	Grassroots non-taxable amount								
e 	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	(a))
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1i						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
26H	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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DLN: 93493195000281

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Rev

Supplemental Financial Statements

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

Open to Public

<u> </u>	Inspection
ame of the organization EACHERS COLLEGE COLUMBIA UNIVERSITY	Employer identification number
art I Organizations Maintaining Donor Advised Funds or Other Simila	r Funds or Accounts. Complete if the
organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts
Total number at end of year	(b) I unus and other accounts
Aggregate contributions to (during year)	
Aggregate grants from (during year)	
Aggregate value at end of year	
Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control	
Did the organization inform all grantees, donors, and donor advisors in writing that grant fuused only for charitable purposes and not for the benefit of the donor or donor advisor, or for conferring impermissible private benefit	·
art II Conservation Easements. Complete if the organization answered "Ye	s" to Form 990, Part IV, line 7.
	of an historically importantly land area of a certified historic structure form of a conservation
easement on the last day of the tax year	Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06	2d
Number of conservation easements modified, transferred, released, extinguished, or termi the taxable year - Number of states where property subject to conservation easement is located -	inated by the organization during
Does the organization have a written policy regarding the periodic monitoring, inspection, enforcement of the conservation easements it holds?	handling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation ea	asements during the year 🟲
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easem	nents during the year 🕨 \$
Does each conservation easement reported on line $2(d)$ above satisfy the requirements of $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	fsection Yes No
In Part XIV, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's finar the organization's accounting for conservation easements	• •
Organizations Maintaining Collections of Art, Historical Treasure Complete if the organization answered "Yes" to Form 990, Part IV, line 8	
If the organization elected, as permitted under SFAS 116, not to report in its revenue stat art, historical treasures, or other similar assets held for public exhibition, education or res provide, in Part XIV, the text of the footnote to its financial statements that describes the	search in furtherance of public service,
If the organization elected, as permitted under SFAS 116, to report in its revenue stateme historical treasures, or other similar assets held for public exhibition, education, or resear provide the following amounts relating to these items	
(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$
If the organization received or held works of art, historical treasures, or other similar asse following amounts required to be reported under SFAS 116 relating to these items	·
Revenues included in Form 990, Part VIII, line 1	▶ \$

Par	Organizations Maintaining Co	ollections of Art	, Hist	orical Tr	eas	ures, or C	Othe	r Simila	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the	following t	hat a	re a sıgnıfıc	ant u	se of its co	llectio	n	
а	▼ Public exhibition		d	√ Loan of the	orex	change prog	rams				
ь	Scholarly research		e	✓ Other	Edu	cational pro	gram	s of Colleg	e		
С	✓ Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	they furthe	r the	organızatıoı	n's e>	cempt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							nılar	Г	Yes	√ No
Pai	rt IV Escrow and Custodial Arrang					n answere	d "Y	es" to Fo	m 990	Ο,	
	Part IV, line 9, or reported an ar			•							
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		-		tions	or other ass	sets	not	Γ	Yes	▽ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	followii	ng table		г					
_						}	4.		A mo	ınt	
C	Beginning balance					-	1c				
d	Additions during the year					-	1d				
e	Distributions during the year					-	1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on F		e 21?						 	Yes	│ No
	If "Yes," explain the arrangement in Part XIV			1 1137					10		
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		<u>vered "Ye:</u>)Prior Year		Form 990 Two Years Bad				NEOUR V	ears Back
1a	Beginning of year balance	181,488,002	(,,	209,178,25		TWO TCGTS BOX	-	Jimee rears	Dack (-) 1 Out 1	cars back
 b	Contributions	794,259		3,786,33	2						
c	Investment earnings or losses	15,799,419		-18,271,642	2						
d	Grants or scholarships	1,236,338		2,350,21	5						
e	Other expenditures for facilities and programs	11,480,308		10,689,930	5						
f	Administrative expenses	167,195		164,79	2						
g	End of year balance	185,197,839		181,488,00	2						
2	Provide the estimated percentage of the yea	r end balance held a	as		•				•		
а	Board designated or quasi-endowment	59.960 %									
ь	Permanent endowment - 40.040 %										
c	Term endowment ▶										
3a	Are there endowment funds not in the posse	ssion of the organiza	ation th	nat are held	and	admınıstere	d for	the			
	organization by	_								Yes	No
	(i) unrelated organizations				•		•		3a(i)	Yes	
	(ii) related organizations						•		3a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organization				•		•		3Ь		
4	Describe in Part XIV the intended uses of the control of the contr				00 5	Dart V Juna	10				
Pel	rt VI Investments—Land, Building	s, and Equipme	nt. se						T		
	Description of investment			(a) Cost or o basis (investr		(b)Cost or o basis (othe		(c) Accumu depreciat		(d) Boo	ok value
1a	Land		. [692	2,443				692,44
b	Buildings		.			195,746	5,391	83,73	88,514	11	2,007,87
c	Leasehold improvements		. [
d	Equipment		. [40,782	2,691	37,38	88,829		3,393,862
е	Other					3,058	8,649				3,058,649

119,152,831

Part VII Investments—Other Securities. See (a) Description of security or category		(c) Metho	od of valuation
(including name of security)	(b)Book value		f-year market value
Financial derivatives Closely-held equity interests			
Other non public equity funds	81,731,427		F
private equity and real estate funds	24,878,921		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	106,610,348		
Part VIII Investments—Program Related. See		13.	
(a) Description of investment type	(b) Book value		od of valuation f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		
(a) Descrip	tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.			
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25. (b) A mount		
Federal Income Taxes	(-,		
Accrued pension and other benefit obligations	61,802,364		
U S government grants refundable	3,050,030		
MTM on derivative instrument conditional asset retirement obligation	7,358,274 1,412,194		
annuities payable and pooled income funds	784,306		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	74,407,168		

_	rotal revenue (Form 990, Part VIII, column (A), line 12)	_	170,770,01
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	183,672,19
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,901,57
4	Net unrealized gains (losses) on investments	4	14,719,63
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-5,391,51
9	Total adjustments (net) Add lines 4 - 8	9	9,328,11
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,426,54
Par	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	174,093,23
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-3,376,79
3	Subtract line 2e from line 1	3	177,470,03
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 3,093,086		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	1,300,58
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	178,770,61
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1 1	169,666,69
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	7,224,89
3	Subtract line 2e from line 1	3	162,441,79
4	A mounts 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 3,093,086		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	21,230,39
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	183,672,19

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

Part XIV Supplemental Information

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

Ident if ier	Return Reference	Explanation
Pt IV Line 2b		the College holds security deposits for dormitory housing in escrow
Pt III Line 1a		The College has elected under SFAS 116 not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets. Collection items are held for educational purposes and are not disposed of for financial gain.
Pt III Line 4		The Gottesman Libraries at Teachers College contain the world's largest and richest collection of materials on educational professions. The contemporary collections are continuously enhanced by an active acquisition program.
Pt III Line 4		JOINTLY PLANNED BY DEPARTMENTAL LIBRARIANS, FACULTY, AND STUDENTS TRADITIONAL PRINT AND NON-PRINT PUBLICATIONS ARE SUPPLEMENTED BY A RAPIDLY GROWING NUMBER OF VISUAL AND ELECTRONIC FORMATS MANY OF THE HISTORICAL AND ARCHIVAL COLLECTIONS ARE UNAVAILABLE ELSEWHERE AND REPRESENT IN BALANCE, BREADTH, AND DEPTH, AN ARCHIVE OF AMERICAN INTELLECTUAL AND SOCIAL HISTORY ELEMENTS OF THESE COLELCTIONS ARE BEING MADE MORE ACCESSIBLE THROUGH ONGOING DIGITIZATION PROJECTS THERE ARE CURRENTLY 430,432 PRINT

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization
TEACHERS COLLEGE COLUMBIA UNIVERSITY

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

	13-1624202			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"		Tes	
	Please explain TEACHERS COLLEGE PUBLISHES ITS NONDISCRIMINATORY POLICY IN STUDENT MATERIAL, HANDBOOKS, AND ON ITS WEBSITE THE FOLLOWING STATEMENT IS USED CONTINUING ITS LONG-STANDING POLICY TO SUPPORT ACTIVE EQUALITY FOR ALL PERSONS, TEACHERS COLLEGE DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, CREED, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, ANCESTRY, AGE, MARITAL STATUS, CITIZENSHIP STATUS, VETERAN STATUS, DISABILITY OR ANY OTHER CRITERION SPECIFIED BY FEDERAL, STATE OR LOCAL LAWS, IN THE ADMINISTRATION OF ITS ADMISSIONS, EMPLOYMENT AND EDUCATIONAL POLICIES OR SCHOLARSHIP, LOAN, ATHLETIC AND OTHER SCHOOL-ADMINISTERED PROGRAMS RATHER, TEACHERS COLLEGE AFFIRMS THAT IT ADMITS STUDENTS AND SELECTS EMPLOYEES REGARDLESS OF THEIR RACE, COLOR, RELIGION, CREED, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, ANCESTRY, AGE, MARITAL STATUS, CITIZENSHIP STATUS, VETERAN STATUS, DISABILITY OR ANY OTHER CRITERION SPECIFIED BY FEDERAL, STATE OR LOCAL LAWS AND THEREAFTER ACCORDS THEM ALL THE RIGHTS AND	3	Yes	
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
_	with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	4c 4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		Νo
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	Yes	

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DLN: 93493195000281

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service **Statement of Activities Outside the United States**

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

Open to Public Inspection

Name of the organization
TEACHERS COLLEGE COLUMBIA UNIVERSITY

Employer identification number

13-1624202

Part I	General Information on	Activities Outside the United States.	. Complete if the organization answer	ed
	"Yes" to Form 990, Part IV	line 14b.		

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or			
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award			
	the grants or assistance?	Yes	Γ	No

2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

3 Activites per Region (Us	se Schedule F-1	(Form 990) if add	ditional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and Pacific	1	3	Program Services	Foreign Campus	988,425
Middle East	0	3	Program Services	educational dvlpmnt	377,500
East Asia and Pacific	0	0	Program Services	educational dvlpmnt,alumni relations	38,583
South America	0	0	Program Services	Speech srvc, alumnı rlts	29,028
Sub-Saharan Africa	0	0	Program Services	Speech services	14,459
Russia	0	0	Program Services	historical research and study	8,407
South Asia	0	0	Program Services	Educational development	5,727
South America	0		agent attending/speaking at conference		778
East Asia and Pacific	0	0	Fundraising		1,415
East Asia and Pacific	0		agent attending/speaking at conference		4,454
Central A merica	0	0	ınvestments		
Middle East	0	0	ınvestments		
Europe	0	0	investments		
Totals ▶	1	6			1,468,776

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	ed in Part I, line 2, and any additional information. Explanation
t I Line 2	Notal invelorance	The College does not have grant funds outside the US
-		The state of the s
	+	
	•	

As Filed Data -

DLN: 93493195000281

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Open to Public

Department of the Treasury

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Inspection Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions. Name of the organization **Employer identification number** TEACHERS COLLEGE COLUMBIA UNIVERSITY 13-1624202 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and e-mail solicitations Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table (iii) Did fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual custody or (iv) Gross receipts (or retained by) (ii) Activity (or retained by) fundraiser listed in or entity (fundraiser) control of from activity organization contributions? col (i) Yes No Planning/Strategy GRENZEBACH GLIER & Nο 219,739 -219,739 ASSOCIATES INC 219,739 -219,739 Total List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or 3 licensing

NΥ

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	(d) To	otal Eve ol (a) th ol (c))	
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			. 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I (a) th ol (c))	
	1 (Gross revenue						
Ses	2 (Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			.			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> . .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
Ь		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.	
12		ne organization a grantor, beneficia ied to administer charitable gaming				. .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493195000281 OMB No 1545-0047

Department of the Treasury

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Open to Public

ame of the organization EACHERS COLLEGE COLUN	MRIA UNIVERSITY	,				Employer identifica	tion number
						13-1624202	
Does the organization methe selection criteria use Describe in Part IV the Part II Grants and Officer Form 990, Part	aaintain records to seed to award the grade organization's proceeds ther Assistance IV, line 21 for all	nts and Assistance substantiate the amount of too the substantiate the amount of the substance?	e of grant funds in the longanizations in dimensions in dimensions than \$5,000			anization answered ' ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
		d government organizations				•	

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 Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Tuition assistance	3634	18,137,310			
See Additional Data Table					
	•	•	•	•	•

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

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

DLN: 93493195000281

OMB No 1545-0047

Employer identification number

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

TEA	CHERS COLLEGE COLUMBIA UNIVERSITY					
			13-1624202			
Pa	rt I Questions Regarding Compensation		·			
					Yes	Νo
1a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	~	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	\vdash	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement orprovision of all the expenses describ			1b		No
2	Did the organization require substantiation prior to rei officers, directors, trustees, and the CEO/Executive D			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that Compensation committee	t appl	ly 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, Pa or a related organization	rt V I	I, Section A, line 1a with respect to the filing organizatio	n		
а	Receive a severance payment or change-of-control pa	ymei	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-bas	ed co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde tl	he applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must					
5	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the revenues of	ne 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			7		No
8	Were any amounts reported in Form 990, Part VII, pai subject to the initial contract exception described in R in Part III		·			NI -
^			and the management of the second seco	8		No
9	If "Yes" to line 8, did the organization also follow the r	eputt	apie presumption procedure described in Requiations	1	1	1

section 53 4958-6(c)?

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base (ii) Bonus & Incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
SUSAN FUHRMAN	(I) (II)	410,971		74,388	24,500	21,430	531,289	
THOMAS JAMES	(ı) (ıı)	267,451		68,758	24,500	26,277	386,986	
HARVEY SPECTOR	(ı) (ıı)	263,169		10,900	24,500	11,140	309,709	
SUZANNE MURPHY	(ı) (ıı)	272,806		69,274	24,500	26,959	393,539	
SCOTT FAHEY	(ı) (ıı)	178,741		53,339	25,867	23,229	281,176	
LORI FOX	(ı) (ıı)	166,592	1,100	29,191	16,555	8,753	222,191	
JANICE ROBINSON	(ı) (ıı)	173,777		54,610	26,666	20,185	275,238	
NANCY STREIM	(ı) (ıı)	171,346	1,964	60,233	20,004	9,705	263,252	
SHARON KAGAN	(ı) (ıı)	172,923	1,100	143,463	31,850	8,340	357,676	
MICHAEL REBELL	(ı) (ıı)	264,657	2,812	6,400	34,300	29,258	337,427	
THOMAS BAILEY	(ı) (ıı)	235,602	1,100	21,506	31,850	19,793	309,851	
RUTH VINZ	(ı) (ıı)	213,586	1,100	39,786	29,452	11,422	295,346	
GARY NATRIELLO	(ı) (ıı)	151,941	1,100	96,441	25,953	7,849	283,284	
JOHN FISCHER	(ı) (ıı)			20,000			20,000	

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Pt I Line 1b		The College provides for certain employee commuting costs, housing and tuition assistance as well additional life insurance benefits, which are included in the employees taxable income

Schedule J (Form 990) 2009

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Schedule K

(Form 990)

DLN: 93493195000281

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a, Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Inspection

Open to Public Department of the Treasury Internal Revenue Service Name of the organization Employer identification number TEACHERS COLLEGE COLUMBIA UNIVERSITY 13-1624202 **Bond Issues** (h) O n (g) Defeased Behalf of (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price (f) Description of Purpose Issuer Yes Yes No No DORMITORY AUTHORITY OF THE STATE OF NEW YORK 14-6000293 6499037N5 01-29-2009 51,832,990 Refund 07 issue & capital impr Χ Χ Part II **Proceeds** В C D Ε Total proceeds of issue 7,257,990 Gross proceeds in reserve funds 2 51,832,990 Proceeds in refunding or defeasance escrows 3 44.575.000 Other unspent proceeds 4,733,494 Issuance costs from proceeds 1,257,990 Working capital expenditures from proceeds 1,257,990 Capital expenditures from proceeds 6,000,000 Year of substantial completion 2011 Yes No Yes No Yes No No Yes Yes No Were the bonds issued as part of a current refunding issue? Χ Were the bonds issued as part of an advance refunding issue? Х 10 Has the final allocation of proceeds been made? Х 11 Does the organization maintain adequate books and records to support Х the final allocation of proceeds? Part III **Private Business Use** C Ε Α В D Yes No Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC. 1 which owned property financed by tax-exempt bonds?

which may result in private business use?

Are there any lease arrangements with respect to the financed property

Part IIII Private Business Use	(Continued)
--------------------------------	-------------

			A	E	3		С	ı)		E
		Yes	No								
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage		•	•	•	•	-	•	•	•	

	<u>-</u>		4	E	3		С)		E
		Yes	No								
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2	Is the bond issue a variable rate issue?		Х								
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		х								
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х								
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		х								
5	Were any gross proceeds invested beyond an available temporary period?		×								
6	Did the bond issue qualify for an exception to rebate?		Х								

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DLN: 93493195000281

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

13-1624202

Part I Excess Benefit Train Complete if the organizat										e 40b	
1 (a) Name of disq			1	1	·		on of tran				rrected?
1 (a) Name of alsq		PC15011			(b) Desc	. HPti	On or train	Saction		Yes	No
											-
2 Enter the amount of tax impos section 49583 Enter the amount of tax, if any								year unde	er ▶ \$ ▶ \$		
Part II Loans to and/or I											
Complete if the organiz	zation a T	ns we re	d "Yes" on Foi 	rm 990), Part IV, line 26	, or F	Form 990	EZ, Part \ (f)		Ι	
(a) Name of interested person and	1 ' '	oan to m the	(c) 0 rıgır			(e) In	Appro	ved	(g)Writte	en
purpose		zation?	principal an		(d)Balance due	de	fault?	by boa		agreemer	ıt?
	То	From				Yes	s No	Yes	No	Yes	No
									_		
otal				> \$							
Part III Grants or Assistar Complete if the orga						/, lın	e 27.				
(a) Name of interested pers			b) Relationship	p betwe	een interested per ganization			mount of o	grant or typ	e of assıs	tance
				·	,						
Part IV Business Transact Complete if the orga						/, lın	e 28a, 2	8b, or 28	Bc.		
·			Relationship				·	·		1	naring of
(a) Name of interested perso	n	1	veen intereste rson and the	d	(c) A mount of transaction		(d) Des	cription of	transactio	n 1 -	zation's nues?
			organization		transaction					Yes	No
REGINA CORTINA spouse of Provost Thomas James				116,5	72	employee	compens	ation		Νο	
ABRAMS CAPITAL LLC		Julie L	eff's brother		2,000,0	00	redemptio	on of inves	ted capital		Νο
				-							

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

Open to Public

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Internal Revenue Service Inspection Name of the organization **Employer identification number** TEACHERS COLLEGE COLUMBIA UNIVERSITY 13-1624202 Part I Types of Property (a) (b) (c) (d) Check Number of Contributions Revenues reported on Method of determining

		ıf		Form 990, Part VIII, line	reven	ues		
_		applicable		1 g				
	Art—Works of art							
	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
_	Intellectual property							
	Securities—Publicly traded .	X	13	400,533	selling price at fair i	narket	value	
	Securities—Closely held stock .			,				
	Securities—Partnership, LLC,							
	or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation							
	contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .							
16								
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts			2.420				
25	Other ► (gift in kind)	X	1	2,120	total expenses paid	by do	nor	
26	Other ►()							
27	Other ► () Other ► ()							
28 29	Number of Forms 8283 received	L by the era	nization during the tay yes	l or for contributions				
29	for which the organization compl				29			
			,	,			Yes	No
30a	During the year, did the organiza	ition receive	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holdıng p	eriod?			30a		No
b	If "Yes," describe the arrangeme	ent in Part I	I					
31	Does the organization have a gif	tacceptano	ce policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third parti	es or related organizations	to solicit, process, or sell i	non-cash			
	contributions?					32a	Yes	
	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	Explanation
Pt I Line 32b		The College has a contractual agreement with State Street to liquidate
Pt I Line 32b	Form 990	securities received State Street acts as a broker
Pt I Line 32b	Form 990	dealer for the sale of publically traded gifts of stock

Schedule M (Form 990) 2009

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DLN: 93493195000281

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Form 990 or to provide any additional information.

► Attach to Form 990.

Complete to provide information for responses to specific questions on

Name of the organization

TEACHERS COLLEGE COLUMBIA UNIVERSITY

Employer identification number

13-1624202

ldentifier	Return Reference	Explanation
Pt VI-B, Line 11A		Along with management, the Audit Committe of the Trustees of the College

ldentifier	Return Reference	Explanation
Pt VI-B, Line 11A		is responsible for reviewing the Form 990 in detail. The final copy of the

ldentifier	Return Reference	Explanation
Pt VI-B, Line 11A		Form 990 open to public inspection is provided to the full

ldentifier	Return Reference	Explanation
Pt VI-B, Line 11A		Board prior to filing

Identifier	Return Reference	Explanation
Pt V⊩B, Line 12c		The College has two conflict of interest policies, Policy A covering

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		the trustees, officers, key employees and the next five highest

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		compensated employees and Policy B covering

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		faculty, instructional and professional employees. Under both

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		policies, conflict of interest forms must be completed on an

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		annual basis

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		Policy A - the annual disclosures are provided to the General Counsel

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		on an annual basis. The forms are reviewed and a report is compiled

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		on the disclosures and reported to the Audit Committee

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		These individuals must notify the Chair of the Board, the Chair of

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		Audit Committee or the President when they first become aware

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		of an actual or potential conflict of interest relating to them or

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		a family member If an actual or potential conflict exists, the

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		ındıvıdual must recuse themselves from consideration of any

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		matter as to which there may be a conflict, subject to the right

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		of the Board or Committee to seek information from the individual

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		The Audit Committee is responsible for the review and evaluation

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		of all potential and actual conflicts and must determine how to

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		manage the potential conflicts The Audit Committee, Executive Committee or the full Board

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		determines w hether to proceed w ith any proposed transaction

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		w ith an interested person after evaluating w hether it is fair

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		and reasonable to the College and w hether the conflicted individual w ould,

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		as a result of the transaction, receive an excessive benefit

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		If it appears that an interested person has failed to disclose an actual

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		or potential conflict, the Board is charged with investigating. If

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		ıt ıs determined that a conflict does exist, the Board may take appropriate

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		disciplinary and corrective action including rescission of the transaction

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		Policy B - the Human Resource Office monitors the submissions

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		of disclosure forms by faculty and staff. Any potential or actual

ldentifier	Return Reference	Explanation
Pt VI-B, Line 12c		conflict is reported to the appropriate officer for evaluation

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		The College's Committee on compensation consists of 7 independent trustee

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		members The President ex officio also serves on the Committee, but recuses

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		herself when relating to her compensation (also recuses herself from the full board and Executive Committee relating

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		to her compensation. The Committee recommends compensation to the Executive Committee, which reports to the

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		full Board, the compensation of Officers, employees in a position

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		to exercise substantial influence over the affairs of the College,

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		endow ed department chairs, and other professional staff and faculty with

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		salary > \$150,000 The Committee meets at least annually or as needed and uses a compensation

Identifier Return Reference		Explanation			
Pt VI-B, Line 15		comparison of Colleges and Universities in the Northeast and Mid-Atlantic area			

ldentifier	Return Reference	Explanation				
Pt VI-B, Line 15		as well as other institutions comprising a smaller set of prestige colleges and universities				

Identifier Return Reference		Explanation				
Pt VI-B, Line 15		The Committee may also use an outside consultant. The annual				

ldentifier Return Reference		Explanation			
Pt VI-B, Line 15		meeting includes review of the presidential and senior staff goals,			

Identifier Return Reference		Explanation			
Pt VI-B, Line 15		review of performance and review of salaries of those listed above			

Identifier Return Reference		Explanation			
Pt VI-B, Line 15		Minutes of all deliberations are recorded, reviewed by the Chair and			

ldentifier	Return Reference	Explanation					
Pt VI-B, Line 15		ratified by the Committee Final approval of the salary recommendations					

ldentifier	Return Reference	Explanation
Pt VI-B, Line 15		is done by the Full Board in Executive session

Identifier Return Reference		Explanation			
Pt VI-C, Line 19		The financial statements are available on the College's website			

ldentifier	Return Reference	Explanation
Pt VI-C, Line 19		The conflict of interest policy is on the College's intranet

Identifier Return Reference		Explanation			
Sch E, Line 7		The governing documents are not available to the public			

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DLN: 93493195000281

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization FEACHERS COLLEGE COLUMBIA UNIVERSITY				Employer identii	rication number
ENGIERO COLLOC COLOPIDA ONIVERDITI	13-1624202				
Part I Identification of Disregarded Entities (Complete	ıf the organization a	inswered "Yes" on	Form 990, Part I	V, line 33.)	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Ei	(e) nd-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	tions (Complete ıf th tax year.)	ne organization ans	swered "Yes" on I	Form 990, Part I	V, line 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity stat (if section 501(c)()	us Direct controlling 3)) entity
THE DORIS DILLON CENTER DBA TEACHERS COLLEGE INNOVATIONS					
C/0 TEACHERS COLLEGE COLUMBIA UNIVE	Professional Dylpmnt	NY	501(c)(3)	170(b)(1)(A)((VI) NA
NEW YORK, NY 100276696 13-4177653	Programs for Educators		() ()		
	•	•	•	•	•

art III			s a Partnership (C d as a partnership di		Yes" on For	m 990, P	art IV, line	34
		(-)			/h)	/i	`	$\overline{}$

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	al or ging
							Yes	No		Yes	No
	- 1' C D-1-1-1 - 1 C		- 11 - 1 - To 1 - 1 - 1 - 1	0	T -1 (C 1 - 1 -	C.U		1 1137			

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

mile of peculiar in the of mile of square and a competition of the com											
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership				
TEACHERS COLLEGE EDUCATIONAL SERVICES LEAF SQUARE SUIDOBASHI BLDG4F 2-21- TOKYO 1010061 JA	EDUCATIONAL SERVICES	JA	NA	С	902,772	761,803	100 000 %				

(6)

Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV,	line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 D	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-1	/ ?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
Ь	Gift, grant, or capital contribution to other organization(s)		1b		No
c	Gift, grant, or capital contribution from other organization(s)		1 c		No
d	Loans or loan guarantees to or for other organization(s)		1d		No
e	Loans or loan guarantees by other organization(s)		1e		No
f	Sale of assets to other organization(s)		1f		No
g	Purchase of assets from other organization(s)		1g		No
h	Exchange of assets		1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)		1 i		No
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)		11		No
m	Sharing of facilities, equipment, mailing lists, or other assets		1m	Yes	
n	Sharing of paid employees		1n	Yes	
o	Reimbursement paid to other organization for expenses		10		No
р	Reimbursement paid by other organization for expenses		1р		No
q	O ther transfer of cash or property to other organization(s)		1 q	Yes	_
r	O ther transfer of cash or property from other organization(s)		1 r	Yes	
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationship	ps and transaction thres	holds		
	(a) Name of other organization	(b) Transaction type(a-r)		(c) : involve	ed
(1) TE	ACHERS COLLEGE EDUCATIONAL SERVICES JAPAN	n		20	7,016
(2) Th	E DORIS DILLON CENTER	r		72	26,770
(3)					
(4)					
(5)					

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

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

(a) Name, address, and EIN of entity	501(c)(3) organizations?		(e) Share of end-of-year assets	(Form 1065)			Gene man part	ag ing tner?		
			Yes	No		Yes	No		Yes	No
										+
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Additional Data

Software ID: Software Version:

EIN: 13-1624202

Name: TEACHERS COLLEGE COLUMBIA UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program sei	rvices				
(Code) (Expenses \$	12,948,019	including grants of \$) (Revenue \$)
INSTRUCTION, RESE SERVICE THE COLL STUDENTS WITH AC	ARCH AND PUBLIC SERV EGE PROVIDES STUDENT CESS RESEARCH AND PU	ICE THE CO S WITH ACCI BLIC SERVIC	LLEGE PROVIDES STUI ESS RESEARCH AND PU E THE COLLEGE PROV	S FOR ITS PRIMARY MISSION OF DENTS WITH ACCESS RESEARCH AN JBLIC SERVICE THE COLLEGE PROV IDES STUDENTS WITH ACCESS RES ARCH AND PUBLIC SERVICE THE CO	'IDES EARCH
(Code) (Expenses \$	9,651,938	ıncludıng grants of \$) (Revenue \$)
and social well being a	ınd to theır ıntellectual, cult	ural and socia	l well being and to their i	sical well being and to their intellectua intellectual, cultural and social well beir ial well being and to their intellectual, c	ng and to

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) (C) A verage Position (check all hours that apply) per © I							(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
JAMES W B BENKARD Trustee	3 00	х						0	0	0
LEE C BOLLINGER Trustee	1 00	Х						0	0	0
CORY A BOOKER Trustee	1 00	×						О	0	0
GENE R CARTER Trustee	1 00	х						0	0	0
GEOFFREY J COLVIN Trustee	3 00	Х						0	0	0
JAMES P COMER MD Trustee	1 00	Х						0	5,000	0
JOYCE B COWIN Trustee	1 00	Х						0	0	0
DAWN DUQUES Trustee	1 00	Х						0	0	0
RUTH L GOTTESMAN Trustee	3 00	Х						0	0	0
PATRICIA GREEN Trustee	3 00	Х						0	0	0
ANTONIA M GRUMBACH Trustee	3 00	Х						0	0	0
MARJORIE L HART Trustee	1 00	Х						0	0	0
JOHN W HYLAND JR Trustee & Co-Chair	5 00	Х						0	0	0
ELLIOT S JAFFE Trustee	3 00	Х						0	0	0
JOHN KLINGENSTEIN Trustee	3 00	х						0	0	0
JAN KRUKO WSKI Trustee	1 00	х						0	0	0
JULIE LEFF Trustee	3 00	Х						0	0	0
EDUARDO J MARTI Trustee	1	Х								
CLAUDE A MAYBERRY JR Trustee	3	х								
JOHN MERROW Trustee	3	Х								
LORRAINE MONROE Trustee	1	Х								
ABBY M O'NEILL Trustee	1	Х								
DAILEY PATTEE Trustee	3	Х								
E JOHN ROSENWALD JR Trustee	3	Х								
WILLIAM D RUECKERT Trustee & Co-Chair	5	х								

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Endopendent Contractors											
(A) Name and Title	(B) (C) A verage Position (check all hours that apply)					II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
MARLA SCHAEFER Trustee	1	х									
LAURIE M TISCH Trustee & Vice Chair	3	х									
GILLIAN NEUKOM TOLEDO Trustee	1	×									
JAY URWITZ Trustee	1	Х									
STEVEN R WECHSLER Trustee	3	×									

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

<u>-</u>					
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Tuition and fees	900,099	113,216,831	113,216,831		
Auxiliary activity	900,099	13,516,187	13,516,187		
Fees & contracts from gov agencies	900,099	8,342,764	8,342,764		
Subscriptions & special collections	611,710	612,674	612,674		
Curriculum Development	611,710	191,344	191,344		