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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning 7/01 . 2009, and ending 6/30 2010 G Check all that apply Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the ROCKEFELLER ARCHIVE CENTER IRS label. 20-8030810 Otherwise, 15 DAYTON AVENUE B Telephone number (see the instructions) print SLEEPY HOLLOW, NY 10591 914-366-6310 or type. See Specific If exemption application is pending, check here Instructions 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation Check type of organization 2 Foreign organizations meeting the 85% test, check here and attach computation Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust If private foundation status was terminated Fair market value of all assets at end of year Accounting method: | Cash X Accrual under section 507(b)(1)(A), check here. (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 107, 161, 577 (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) for charitable expenses per books income income purposes (cash basis only) (see the instructions)) 621,700 Contributions, gifts, grants, etc, received (att sch) Ck ► I If the foundn is **not** req to att Sch B Interest on savings and temporary 2,722 2,722 cash investments 2,722 4,822,713 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) REVENUE 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total Add lines through 10 624,4224,825,435 825,435 547,300. 019,255. 508,470.13 Compensation of officers, directors, trustee 508,470. Other employee salaries and wages OF 019,255. 1,894,930. 805,655. 15 805,655 786,664. 16a legal fees (attach schedule) ADMINISTRATIVE b Accounting fees (attach sch) UT c Other profitees (attach sch) See 1,091,286 703,046 388,240.388,240 OPERAT TEGZAED See Stm 2 115,000 115,000 18 Taxes (attach schedule)(see instr.) Depreciation (attach 322,870 891,724 104,215 302,345 876,356 104,215 sch) and depletion 20 Occupancy <u>876,356</u> Travel, conferences, and meetings. 104,215 22 Printing and publications Other expenses (attach schedule) See Statement 3 610,854 610,854 486,445. Total operating and administrative expenses. Add lines 13 through 23 6,508,159 703,046 5,188,636. 5,587,074 Contributions, gifts, grants paid Part XV 85,617 85,617. 26 Total expenses and disbursements. Add lines 24 and 25 703,046 5,587,074 5,274,253. 6,593,776 Subtract line 26 from line 12: a Excess of revenue over expenses -5,969,354 and disbursements. 4,122,389 b Net investment income (if negative, enter -0-). C Adjusted net income (if negative, enter -0-) 0.

| Part II Balance Sheets | | Palanca Shoots | Attached schedules and amounts in the description column should be for end-of-year amounts only | | | End of year | | |
|----------------------------|-----------------------|--|---|---------------------------|-----------------------|-------------|-----------------------|--|
| Part | | Dalance Sheets | (See instructions) | (a) Book Value | (b) Book Value | e | (c) Fair Market Value | |
| | 1 | Cash - non-interest | -bearing | | | | | |
| | 2 | Savings and tempor | ary cash investments | 4,540,705. | 1,716,1 | 06. | 1,716,106. | |
| | 3 Accounts receivable | | - | | <u></u> | | | |
| | | Less allowance for | doubtful accounts ► | | | | | |
| | 4 | Pledges receivable | > | | | | | |
| | | Less allowance for | doubtful accounts ► | | | | | |
| | 5 | Grants receivable | | | | | | |
| | 6 | | cers, directors, trustees, and other ch schedule) (see the instructions). | | | | | |
| | 7 | Other notes and loans rec | eivable (attach sch) 🕨 | | | | | |
| A S | | Less: allowance for | doubtful accounts ► | | | | | |
| Š | 8 | Inventories for sale | or use | | | | | |
| A S S E T S | 9 | Prepaid expenses ai | nd deferred charges | | | | | |
| S | 10 | a Investments – U S obligations (attach s | and state government chedule) | | | | | |
| | ı | b Investments — corporate | stock (attach schedule) | | | | | |
| | (| c Investments — corporate | bonds (attach schedule) | 82,070,438. | 84,817,2 | 74. | 84,817,274. | |
| | 11 | Investments – land, equipment basis | buildings, and | | | | | |
| | | Less: accumulated deprec (attach schedule) | ation | ~ | | | | |
| | 12 | Investments - morto | gage loans | | | | | |
| | 13 | Investments - other | (attach schedule) | 2,500,505. | 2,500,5 | 05. | 2,500,505. | |
| | 14 | Land, buildings, and e | equipment basis. <u>18,752,339.</u> | · · · | | | <u></u> | |
| | | Less: accumulated deprec (attach schedule) | nation See Stmt 4 ►631,332. | 17,331,156. | 18,121,0 | | 18,121,007. | |
| | | | be► <u>See Statement 5</u>) | 3,129. | 6,6 | 85. | 6,685. | |
| | | see instructions. Als | completed by all filers — o, see page 1, item I) | 106,445,933. | 107,161,5 | | 107,161,577. | |
| Ļ | 17 | | nd accrued expenses | 323,139. | 816,0 | 95. | | |
| À | 18 | Grants payable | | | | | 1 | |
| В | 19 | Deferred revenue | | | | | | |
| Ļ | 20 | · · | tors, trustees, & other disqualified persons | | | | 1 | |
| ÷ | 21 | | s payable (attach schedule) | 2 061 770 | 1 260 2 | 24 | | |
| Ī | 22 | Other liabilities (descr | be ► See Statement 6) | 3,061,778. | 1,268,3 | <u> 24.</u> | i | |
| E S | 23 | Total liabilities (add | | 3,384,917. | 2,084,4 | 19. | 1 | |
| | | Foundations that fo and complete lines | llow SFAS 117, check here 24 through 26 and lines 30 and 31. | | | | | |
| ΝĒ | 24 | Unrestricted | | 81,163,366. | 83,179,5 | 08. | | |
| N F E U T N | 25 | Temporarily restricte | e d | | | | | |
| ם | 26 | Permanently restrict | ed | 21,897,650. | 21,897,6 | <u>50.</u> | | |
| A B A L T | | Foundations that do and complete lines | o not follow SFAS 117, check here P 27 through 31. | | | • | | |
| E L | 27 | Capital stock, trust of | orincipal, or current funds | | | | | |
| SN | 28 | | or land, building, and equipment fund | | | | | |
| O E | 29 | | ulated income, endowment, or other funds | | | | | |
| O E R S | 30 | Total net assets or f | und balances (see the instructions) | 103,061,016. | 105,077,1 | 58. | | |
| | 31 | (see the instructions | | 106,445,933. | 107,161,5 | | | |
| Part | | Analysis of Chan | ges in Net Assets or Fund Balanc | es | | | | |
| 1 | Tota end- | I net assets or fund ba of-year figure reported | alances at beginning of year – Part II, colu d on prior year's return) | ımn (a), line 30 (must aç | gree with | 1 | 103,061,016. | |
| | | r amount from Part I, | | | İ | 2 | -5,969,354. | |
| | | increases not included in lii | | 7 | | 3 | 7,985,496. | |
| | | lines 1, 2, and 3 | | | | 4 | 105,077,158. | |
| | | ases not included in line 2 (| itemize) | | | 5 | | |
| 6 | Tota | I net assets or fund ba | alances at end of year (line 4 minus line 5) | - Part II, column (b), I | ine 30 | 6 | 105,077,158. | |

| ' (a) List and desci | d Losses for Tax on Investmen ribe the kind(s) of property sold (e g., r ouse, or common stock, 200 shares ML | eal estate, | (b) How acquire P — Purchase D — Donation | d (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|---|---|--|---|--|-------------------------------------|
| 1a N/A | 7 | | D Donation | | |
| b | | | | | |
| <u> </u> | | | | | · |
| e | | | - | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other bas plus expense of sal | | (h) Gain or (e) plus (f) m | |
| a | | | | | |
| b | | | | | |
| d | | _ | | | |
| e | | | —————————————————————————————————————— | | |
| Complete only for assets sh | owing gain in column (h) and owned by | the foundation on 12/31/69 | | (I) Gains (Col | |
| (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column over column (j), if a | | gain minus column (than -0-) or Losses (f | (), but not less rom column (h)) |
| <u>a</u> | | | | | |
| <u>b</u> | | | | | |
| <u>d</u> | | | | | |
| е | | | | | |
| 2 Capital gain net income or (| net capital loss) — If gain, also | enter in Part I, line 7 ter -0- in Part I, line 7 | . 2 | | |
| 3 Net short-term capital gain of | or (loss) as defined in sections 1222(5) | and (6). | | | |
| ın Part I, Iine 8 | ine 8, column (c) (see the instructions) | | . 3 | | |
| | ler Section 4940(e) for Reduce rate foundations subject to the section | | | <u> </u> | |
| If 'Yes,' the foundation does not qu | e this part blank section 4942 tax on the distributable an ualify under section 4940(e). Do not co nt in each column for each year; see th | mplete this part | • | Yes | X No |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use ass | sets (c | (d) Distribution olumn (b) divided | |
| 2008 | 4,277,123. | 95,89 | 0,788. | | 0.044604 |
| 2007 | | | | | |
| 2006 | | | | | |
| 2005 2004 | | | | | |
| | * | | | | |
| 2 Total of line 1, column (d) | | | 2 | | 0.044604 |
| 3 Average distribution ratio for number of years the foundat | the 5-year base period — divide the to ion has been in existence if less than 5 | otal on line 2 by 5, or by the 5 years | 3 | | 0.011151 |
| 4 Enter the net value of nonch | arıtable-use assets for 2009 from Part | X, line 5 | 4 | . 8 | 7,424,391. |
| 5 Multiply line 4 by line 3 | | | 5 | | 974,869. |
| 6 Enter 1% of net investment | income (1% of Part I, line 27b) | | 6 | | 41,224. |
| 7 Add lines 5 and 6 | | | 7 | | 1,016,093. |
| 8 Enter qualifying distributions | | | 8 | - | 5,274,253. |
| If line 8 is equal to or greate Part VI instructions | r than line 7, check the box in Part VI, | line 1b, and complete that | part using a 1 | % tax rate See t | he |

| | 1 990-PF (2009) ROCKEFELLER ARCHIVE CENTER 20-803081 | | | ² age 4 |
|------------|--|--------------|--------------|---------------------------|
| Par | | uction | <u>s)</u> | |
| 1 : | a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary - see instr.) | | 4-1 | 00. |
| ı | Domestic foundations that meet the section 4940(e) requirements in Part V, | | 41, | 224. |
| | check here ► X and enter 1% of Part I, line 27b | | | |
| • | : All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | - | | |
| | foundations only Others enter -0-) | | A 1 | <u>0.</u> |
| 3 | Add lines 1 and 2 | | 41, | 224. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | 41 | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | 41, | 224. |
| 6 | Credits/Payments | | | |
| | a 2009 estimated tax pmts and 2008 overpayment credited to 2009 | | | |
| | Exempt foreign organizations — tax withheld at source 6b | | | |
| | : Tax paid with application for extension of time to file (Form 8868) | | | |
| | Backup withholding erroneously withheld Tatal and normants. Add lines for through 6d. | | | |
| , | Total credits and payments Add lines 6a through 6d Fator any panelty for undergoyment of estimated toy. Check here. Y if Form 2220 is attached. | | 1 | <u>0.</u> 240. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed See Statement 8 | | _ | <u>240.</u> 338. |
| 9 | | | 40, | 336. |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded Refunded | | | |
| 11 Day | Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded 11 | | | |
| | | | Yes | No |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1 | 1 | X |
| | | ⊢- | - | ┼^ |
| ı | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | 1 | <u>.</u> | X |
| | · · | — | - | + <u>~</u> |
| | If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. | | ļ | |
| | : Did the foundation file Form 1120-POL for this year? | 1 | c | X |
| • | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation (2) On foundation managers (3) | o. | | |
| • | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on | ' | | |
| | foundation managers. >\$ 0. | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| | If 'Yes,' attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | |
| 3 | of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | 3 | | Х |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4 | a | X |
| t | If 'Yes,' has it filed a tax return on Form 990-T for this year? | 4 | b N | /A |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | X |
| | If 'Yes,' attach the statement required by General Instruction T | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | |
| | ● By language in the governing instrument, or | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict. | | <u> </u> | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | | X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | 7 | X | <u> </u> |
| 8 <i>a</i> | Enter the states to which the foundation reports or with which it is registered (see the instructions). | | | |
| | <u>NY</u> | | | |
| Ŀ | If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | ,, |
| | (or designate) of each state as required by General Instruction G ² If 'No,' attach explanation See Statement 9 | 8 | b | X |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV) | 5) | - | \vdash |
| | | V <u>9</u> | X | |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses See Statement 10 | 10 | X | |
| BAA | | | | (2009) |
| | | | | \/ |

| Forn | n 990-PF (2009) ROCKEFELLER ARCHIVE CENTER | 20-803081 | 0 | P | age 5 |
|------------|--|-----------------|------------|------------|--------------|
| Par | t VII-A Statements Regarding Activities Continued | | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | | 11 | | Х |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | | 12 | | Х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption | on application? | 13 | X | |
| | Website address ► www.rockarch.org | | | | |
| 14 | | ne no • 914-36 | 6-6 | 310 310 | |
| | Located at ► 15 DAYTON AVENUE SLEEPY HOLLOW NY ZIP + 4 | | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | | N/A | ► | TT. |
| | and enter the amount of tax-exempt interest received or accrued during the year | ▶ 15 | | | N/A |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | | Yes | No |
| 1 a | a During the year did the foundation (either directly or indirectly). | | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | X Yes No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | Yes X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | X Yes No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | X Yes No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | Yes X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) | Yes X No | | | |
| ŀ | b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruct | ı :ions)? | 1 b | | Х |
| | Organizations relying on a current notice regarding disaster assistance check here | ▶ 🗍 | | | |
| (| Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2009? | j , | 1 c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | | |
| ā | a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? | Yes X No | | | |
| | If 'Yes,' list the years ► 20 , 20 , 20 , 20 | | | | |
| ŀ | Are there any years listed in 2a for which the foundation is not applying the provisions of section 494 | 2(a)(2) | | | |
| _ | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 | ?(a)(2) to | | | |
| | all years listed, answer 'No' and attach statement — see the instructions) | | 2b | N | /A |
| • | c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years | here | | | |
| | ► 20 , 20 , 20 , 20 | ļ | | | |
| 3 a | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | Yes X No | | | |
| t | of If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approvable to Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or | า ed | | | |
| | (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule Č, Form 4720, to determine if the foundation had excess business holdings in 2009.) | I | 3b | N | /A |
| 4 a | a Did the foundation invest during the year any amount in a manner that would jeopardize its | | A = | | v |
| | charitable purposes? | | 4a | | X |
| t | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of | | | - | |
| | the tax year beginning in 2009? | | 4 b | | X |

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Form **990-PF** (2009)

| Form 990-PF (2009) ROCKEFELLER ARCHIV | | | 20-803 | 30810 | Page 6 |
|---|--|---|--|-----------------------|---|
| Part VII-B Statements Regarding Activit | | <u> 14720 May Be Req</u> | uired (continued) | | |
| 5a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt | - | n (section 4945(e))? | Yes X | No | |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | lic election (see section | 1 4955), or to carry | Yes X | No | |
| (3) Provide a grant to an individual for travel, | | purposes? | X Yes | No | |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | nan a charitable, etc, oi 4940(d)(2)? (see instri | rganization described uctions) | Yes X | No | |
| (5) Provide for any purpose other than religio educational purposes, or for the prevention | us, charitable, scientific n of cruelty to children | c, literary, or or animals? | Yes X | No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to a current notice regard | qualify under the excep ding disaster assistance | tions | 5 b | X |
| Organizations relying on a current notice rega | rding disaster assistand | ce check here | ▶ _ | | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi | sibility for the grant? | | N/A Yes |] No | |
| 6a Did the foundation, during the year, receive air on a personal benefit contract? | | | S ∏Yes X | No | |
| b Did the foundation, during the year, pay prem | ums, directly or indirec | tly, on a personal bene | | 6b | X |
| If 'Yes' to 6b, file Form 8870 | • | | | , | |
| 7a At any time during the tax year, was the found | | | | No | N/A |
| b If yes, did the foundation receive any proceed Part VIII Information About Officers, D | | | | 7b Emplovee | |
| and Contractors | | | | | |
| 1 List all officers, directors, trustees, foundation | n managers and their | | | | |
| (a) Name and address | (b) Title and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expen other al | se account, lowances |
| See Statement 11 | | | | | |
| | | 547,300. | 155,274. | | 8,717. |
| | | , | · · | | |
| | | | , , | | |
| | | | | | <u>-</u> |
| | | | _ | | |
| 2 Compensation of five highest-paid employee | s (other than those in | luded on line 1- see in | structions). If none, e | nter 'NONE | <u>.' </u> |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | | se account, lowances |
| ROSEANN VARIANO 15 DAYTON AVENUE | FAC COORDINAT | | | | |
| SLEEPY HOLLOW, NY 10591 | 35 | 102,280. | 27,330. | ļ | 0. |
| KEN ROSE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | ASSOC DIRECTO | 101,890. | 48,103. | | 2,138. |
| LEE HILTZIK 15 DAYTON AVENUE | ASST DIRECTOR | | | | ··· <u></u> |
| SLEEPY HOLLOW, NY 10591 ERWIN LEVOLD | 35 | 83,655. | 43,922. | | 356. |
| 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | SR RESEARCH A | 82,620. | 26,948. | | 0. |
| MICHELE HILTZIK 15 DAYTON AVENUE | ASST DIRECTOR | | | | |
| SLEEPY HOLLOW, NY 10591 | ASSI DIRECTOR 35 | 78,694. | 20,324. | | 439. |

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| Information About Officers, Directors, Trustees, Foundation Contractors (continued) | dation Managers, Highly Paid E | |
|---|-------------------------------------|------------------|
| 3 Five highest-paid independent contractors for professional services — (see enter 'NONE.' | instructions). If none, | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| THE ROCKEFELLER UNIVERSITY | ,,,,, | |
| 1230 YORK AVENUE | | |
| NEW YORK, NY 10065 | FINANCIAL SERVICES | 703,046. |
| LANDMARK FACILITIES GROUP | | <u> </u> |
| 252 EAST AVENUE | | |
| NORWALK, CT 06855 | FACILITY DESIGN | 173,540. |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | 0 |
| Part [X-A] Summary of Direct Charitable Activities | · · · | |
| | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica organizations and other beneficiaries served, conferences convened, research papers produced, etc | I information such as the number of | Expenses |
| 1 N/A | · | |
| 1 N/A | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| Park 🎇 B Summary of Program-Related Investments (see ınstru | ctions) | |
| Describe the two largest program-related investments made by the foundation du | ring the tax year on lines 1 and 2 | Amount |
| 1 <u>N/A</u> | | |
| | | |
| 2 | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |

Total. Add lines 1 through 3 Form **990-PF** (2009) BAA

Adjusted qualifying distributions. Subtract line 5 from line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)

b Cash distribution test (attach the required schedule).

BAA

Form 990-PF (2009)

5,274,253.

3a

3 b

4

| <u>Part</u> | XIII Undistributed Income (see ins | structions) | N/A | | |
|-------------|--|---------------|----------------------------|--------------------|--------------------|
| | | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
| 1 1 | Distributable amount for 2009 from Part XI, | | , | | |
| | line 7 | | | | |
| | Undistributed income, if any, as of the end of 2009 | | | | |
| al | Enter amount for 2008 only | | | | |
| | Total for prior years 20, 20, 20 | | | <u> </u> | |
| | Excess distributions carryover, if any, to 2009. | | | | |
| | From 2004 | _ | | | |
| - | From 2005 | | | | |
| | From 2006 | | | | |
| | From 2007 | _ | | | |
| | From 2008 | | | | |
| | Total of lines 3a through e. | | | | |
| | Qualifying distributions for 2009 from Part | | | | |
| | XII, line 4: ► \$ | | | | |
| a . | Applied to 2008, but not more than line 2a | | | | |
| b , | Applied to undistributed income of prior yea (Election required – see instructions) | nrs | | | |
| c · | Treated as distributions out of corpus (Election required – see instructions) | | | | |
| | Applied to 2009 distributable amount | | | | |
| | Remaining amount distributed out of corpus | ; | | | |
| | Excess distributions carryover applied to 2009 | | | | |
| | (If an amount appears in column (d), the | | | | , |
| | same amount must be shown in column (a) | 기 | | | |
| e 1 | Entag the not total of each column as | | | | |
| | Enter the net total of each column as indicated below: | | | | |
| a (| Corpus. Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| ы | Prior years' undistributed income Subtract line 4b from line 2b | | | | |
| | | | | | |
| | Enter the amount of prior years' undistribut ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| | Subtract line 6c from line 6b Taxable amount see instructions. | | | | |
| | Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions | | | | |
| 4 | Undistributed income for 2009 Subtract line 4d and 5 from line 1. This amount must be distributed in 2010 | es | | | |
| i | Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | | |
| 8 8 | Excess distributions carryover from 2004 no | | | | |
| 9 1 | applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2010. | | | | |
| | Subtract lines 7 and 8 from line 6a Analysis of line 9 | - | | | |
| а | Excess from 2005 | | | | |
| b 8 | Excess from 2006 | | | | |
| c i | Excess from 2007 | | | | |
| d E | Excess from 2008 | | | | |
| e E | Excess from 2009 | | | | |

| Part XIV Private Operating Foundation | ons (see instruct | tions and Part \ | /II-A, guestion 9 |)) | |
|---|---|---|---|-----------------------|-------------------|
| 1a If the foundation has received a ruling or on is effective for 2009, enter the date of the | determination letter ruling | that it is a private of | operating foundation | | 6/20/06 |
| b Check box to indicate whether the foundat | tion is a private ope | rating foundation d | escribed in section | X 4942(J)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum investment return from Part X for | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| each year listed | 0. | 3,514,135. | | | 3,514,135. |
| b 85% of line 2a | | 2,987,015. | | | 2,987,015. |
| c Qualifying distributions from Part XII, line 4 for each year listed | 5,274,253. | 4,277,123. | | | 9,551,376. |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | 0. |
| Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | 5,274,253. | 4,277,123. | | | 9,551,376. |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets' alternative test — enter | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | 2,928,717. | 3,196,359. | | | 6,125,076. |
| c 'Support' alternative test - enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Supplementary Information assets at any time during th | (Complete this | part only if the structions.) | organization ha | ıd \$5,000 or moı | re in |
| 1 Information Regarding Foundation Manag | _ | • | | | |
| List any managers of the foundation who have close of any tax year (but only if they have None | nave contributed mo e contributed more t | ore than 2% of the than \$5,000) (See | total contributions r section 507(d)(2)) | eceived by the found | dation before the |
| None | | | | | |
| b List any managers of the foundation who ca partnership or other entity) of which the | own 10% or more of foundation has a 10 | the stock of a corp)% or greater intere | poration (or an eque est | ally large portion of | the ownership of |
| None | | | | | |
| 2 Information Regarding Contribution, Gran Check here if the foundation only nature requests for funds. If the foundation make complete items 2a, b, c, and d | nakes contributions | to preselected cha | rıtable organızatıon | | • |
| a The name, address, and telephone number | er of the person to w | hom applications s | should be addresse | d. | |
| | | | | | |
| | | | | | |
| See Statement 12 | | | | | |
| b The form in which applications should be s | submitted and inform | nation and materia | ls they should inclu | de | |
| See Statement for Line 2a | | | | | |
| c Any submission deadlines. | | | | | |
| See Statement for Line 2a | | | | | |
| d Any restrictions or limitations on awards, s | such as by geograpl | nical areas, charital | ble fields, kinds of | nstitutions, or other | factors |
| See Statement for Line 2a | | | | | |

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|----------------------------------|---------|
| Name and address (home or business) | substantial contributor | recipient | CONTIDUCTOR | |
| Name and address (home or business) a Paid during the year See Statement 13 | any foundation manager or substantial contributor | recipient | contribution | |
| | | | | |
| | | | | |
| Total | | | ► 3a | 85,617. |
| b Approved for future payment | | | | 05,017. |
| Total | | | ▶ 3h | |

| Part YVI-A | Analysis | of Income-Pr | oducina | Activities |
|------------|-----------|--------------|---------|------------|
| rari Ayı-A | Milalysis | of income-Pr | oaucing | Acuviues |

| a b | n service revenue: | _ (a) | 4.1 | 1 1 | | |
|------------------|--|--------------------------------------|--|-------------------------------|--|---|
| a b | | Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | (e) Related or exempt function income (see the instructions |
| b | | | . | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | - | | | |
| f | | | | | | |
| g Fees an | d contracts from government agencies | | | | | |
| 2 Member | ship dues and assessments | | | | | |
| 3 Interest or | savings and temporary cash investments | | | . 1 | 2,722. | |
| 4 Dividend | ds and interest from securities | | - | | | |
| 5 Net rent | al income or (loss) from real estate | | | | | <u></u> |
| a Debt-fin | anced property | | | | | |
| b Not deb | t-financed property | | | | | |
| 6 Net rental | income or (loss) from personal property | | | | | |
| 7 Other in | vestment income | | | | | |
| • | oss) from sales of assets other than inventory | | | | | |
| | ome or (loss) from special events | | | | | |
| = | rofit or (loss) from sales of inventory | | , | | • | |
| 11 Other re | evenue | ļ | | | | |
| | | <u> </u> | | + | | |
| | | - | | | | *** |
| | | <u> </u> | | + | | |
| | | | | | | |
| e | L Add as houses (I.) (I) and (I.) | | | | 2 722 | |
| | Add columns (b), (d), and (e) | | · | | 2,722. 1 3 | 2,722 |
| | dd line 12, columns (b), (d), and (e) | alaulatiama \ | | | 13 | 2,122 |
| See worksne | et in the instructions for line 13 to verify o | alculations.) | | | . ,, | |
| Part XVI-B | Relationship of Activities to the | e Accomplisi | hment of Exem | pt Purpose | es | |
| Line No. E | xplain below how each activity for which is complishment of the foundation's exemp | ncome is reporte t purposes (othe | ed in column (e) of r than by providing | Part XVI-A c | contributed important ch purposes) (See t | ly to the he instructions) |
| 3 N | OT APPLICABLE | | | | | |
| | | | | | | |

| Part XVI-B | Relationship of | Activities to the | Accomplishment | of Exempt | Purposes |
|------------|-----------------|-------------------|----------------|-----------|----------|
| | | | | | |

| ▼ | accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions) |
|---|---|
| 3 | NOT APPLICABLE |
| | |
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BAA

| | rt XVII | | egarding T | ransfers To and Transac | tions an | d Relationsh | ips With No | ncharitable | | <u>ge 13</u> |
|---------|--|--|---|---|------------------------------------|--|---|---|-----------|---------------|
| | descr | ne organization directly ibed in section 501(c) ng to political organization | of the Code (c | engage in any of the following vother than section 501(c)(3) org | with any o anizations | ther organizatios) or in section ! | n 527, | | Yes | No |
| | | | g foundation to | a noncharitable exempt organ | ization of | | | | | |
| | (1) C | | | | | | | 1a (1) 1a (2) | | <u>X</u> |
| | (2) Other assets | | | | | | | | | X |
| | b Other transactions. | | | | | | | 1 5 (1) | | i |
| | (1) Sales of assets to a noncharitable exempt organization | | | | | | | 1 b (1) | | <u>X</u> |
| | (2) Purchases of assets from a noncharitable exempt organization.(3) Rental of facilities, equipment, or other assets | | | | | | | 1b(2) | | X |
| | • • • | • | • | er assets | | | | 1b (3) | | X |
| | • • | eimbursement arrange | | | | | | 1 b (4) 1 b (5) | | X |
| | | oans or loan guarante | | nip or fundraising solicitations | | | | 1 b (6) | | X |
| | • • | | | sts, other assets, or paid emplo | NAAS | | | 1c | | X |
| | Conam | ng or lacinities, equipm | lent, maning ii | sts, other assets, or paid empire | Jyees | | | | | |
| | d If the the go any tr | answer to any of the bods, other assets, or ransaction or sharing | above is 'Yes,' services given arrangement, s | complete the following schedu by the reporting foundation If show in column (d) the value of | le Colum the found the goods | n (b) should alv lation received I s, other assets, | vays show the f ess than fair m or services rec | air market val arket value in eived | ue of | |
| (a |) Line no | (b) Amount involved | (c) Name | of noncharitable exempt organization | (d) | Description of tran | sfers, transactions, | and sharing arrai | ngement | s |
| N | /A | | | | | | | | | |
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| | | | <u> </u> | | | · · - | | | | |
| | descr | foundation directly or ibed in section 501(c) s,' complete the follow | of the Code (d | nated with, or related to, one or other than section 501(c)(3)) or | more tax in section | -exempt organi: 1 527? | zations | Yes | X | No |
| | | (a) Name of organiza | | (b) Type of organizati | on | (0 |) Description of | f relationship | | - |
| N, | /A | | | , , , , , | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | _ | | |
| | | | | | | | | | | |
| | _ | | | | | | | | | |
| | Under pena complete_f | alties of perjury, I declare that Declaration of preparer (other | I have examined to than taxpayer or fi | his return, including accompanying sched duciary) is based on all information of wh | ules and state ich preparer f | ements, and to the benas any knowledge | est of my knowledge | and belief, it is tru | e, correc | ct, and |
| | -1/ | W. XW | (/,- | م ا با ا | 15 | 116/2011 | > 000 | | | |
| SIGN | ـ لِـ | ature of officer or toroton | 1014 | wen (| | (| <u>C00</u> | · | | |
| G N | Signa | ature of officer or trustee | | | Date | | Title | Prenararie Idanii | une rece | her |
| I | Daid | Preparer's | | | Date | e | Check if | Preparer's Identify (See Signature in | | |
| H E R E | Paid Pre- | signature Seli | -Prepare | i i | | | self- employed ► | | | |
| E | parer's | Firm's name (or | | | | | EIN - | | | |
| | Use Only | yours if self- employed), | | | | | | | | |
| | • | address, and ZIP code | | | | | Phone no ► | | | |

Phone no ►

Form **990-PF** (2009)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

| Name of the organization | ··· | Employer identification number | | | | |
|--|---|--|--|--|--|--|
| ROCKEFELLER ARCHIVE CENTER 20-8030810 | | | | | | |
| Organization type (check one) | | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | 90 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation | | | | | |
| Check if your organization is covered by the Ge Note: Only a section 501(c)(7), (8), or (10) organization | eneral Rule or a Special Rule anization can check boxes for both the General Rule and | a Special Rule See instructions | | | | |
| General Rule - | | | | | | |
| X For an organization filing Form 990, 990-EZ contributor (Complete Parts I and II) | Z, or 990-PF that received, during the year, \$5,000 or mor | e (in money or property) from any one | | | | |
| Special Rules — | | | | | | |
| 509(a)(1)/170(b)(1)(A)(vi) and received from any | form 990 or 990-EZ, that met the 33-1/3% support test of tone contributor, during the year, a contribution of the greater or (ii) Form 990-EZ, line 1 Complete Parts I and II | the regulations under sections f (1) \$5,000 or (2) 2% of the | | | | |
| For a section 501(c)(7), (8), or (10) organiz aggregate contributions of more than \$1,00 prevention of cruelty to children or animals. | ation filing Form 990 or 990-EZ, that received from any o 0 for use <i>exclusively</i> for religious, charitable, scientific, lif. Complete Parts I, II, and III | ne contributor, during the year, terary, or educational purposes, or the | | | | |
| For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributior, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively | | | | | | |
| religious, charitable, etc, contributions of \$5 | 5,000 or more during the year. | ►\$ | | | | |
| 990-PF) but it must answer 'No' on Part IV. line | the General Rule and/or the Special Rules does not file e 2 of their Form 990, or check the box on line H of its Fog requirements of Schedule B (Form 990, 990-EZ, or 990 | orm 990-EZ, or on line 2 of its Form | | | | |
| BAA For Privacy Act and Paperwork Reduction for Form 990, 990EZ, or 990-PF. | on Act Notice, see the Instructions Scheo | dule B (Form 990, 990-EZ, or 990-PF) (2009) | | | | |

| Schedule B (Form 990, 990-EZ, or 990-PF) (2009) | Page 1 | of 1 | of Part I |
|--|-------------|----------------------|-----------|
| Name of organization | Employer id | lentification number | r |

| _ | | 1 ' ' |
|---------------------|--------|-----------|
| ROCKEFELLER ARCHIVE | CENTER | 20-803081 |
| | | |

| r crir i | Contributors (see instructions.) | | |
|---------------|-----------------------------------|-----------------------------------|---|
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | THE ROCKEFELLER UNIVERSITY | | Person X Payroll |
| | 1230 YORK AVENUE | \$500,000. | Noncash |
| | NEW YORK, NY 10065 | | (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 2 | COMMONWEALTH FOUNDATION | | Person X |
| | 225 STATE STREET | \$90,000. | Payroll |
| | HARRISBURG, NY 17101 | | (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 3 | RUSSELL SAGE FOUNDATION | | Person X |
| | 112 EAST 64TH STREET | \$ <u>10,000</u> . | Payroll Noncash |
| | NEW YORK, NY 10065 | | (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 4 | NEAR EAST FOUNDATION | | Person X |
| | 900 S CROUSE AVENUE | \$11,200. | Payroll Noncash |
| | SYRACUSE, NY 13244 | | (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| <u>5_</u> _ | SOCIAL SCIENCE RESEARCH COUNCIL | | Person X |
| | 1688 VICTORY BLVD | \$ <u>10,000.</u> | Payroll Noncash |
| | STATEN ISLAND, NY 10314 | | (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |

Page

of 1

of Part II

Name of organization

ROCKEFELLER ARCHIVE CENTER

Employer identification number

20-8030810

| Part II | Noncash Property (see instructions) | | |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | N/A | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| | | · · · · · · · · · · · · · · · · · · · | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| | | \$\$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | s | |
| | | - | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| | | \$ | |
| BAA | | Schedule B (Form 990, 990-F7 | or 990-PF) |

Name of organization

Employer identification number

ROCKEFELLER ARCHIVE CENTER 20-8030810

| | <i>Exclusively</i> religious, charitable, e organizations aggregating more the | tc, individual contributio nan \$1,000 for the year.(Co | ns to section omplete cols (| on 501(c)(7), (8), or (10) (a) through (e) and the following | g line entry) |
|---------------------------|--|---|-----------------------------------|---|---------------|
| | For organizations completing Part III, enter contributions of \$1,000 or less for the year | total of <i>exclusively</i> religious, ch (Enter this information once — | naritable, etc, see instructio | | N/A |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift | |
| | N/A | | | | |
| | | (e) Transfer of gift | | | |
| | Transferee's name, addres | ss, and ZIP + 4 | Rela | tionship of transferor to transf | leree |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift | is held |
| | Transferee's name, addres | (e) Transfer of gift ss, and ZIP + 4 | Rela | tionship of transferor to transf | feree |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift | is held |
| | | (e) Transfer of gift | | | |
| | Transferee's name, addres | | Rela | tionship of transferor to trans | feree |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift | is held |
| | | | | | |
| | Transferee's name, addres | (e) Transfer of gift ss, and ZIP + 4 | Rela | tionship of transferor to trans | feree |
| | | | | | |

| 2009 Fe | leral Statements | Pag |
|--|---|--|
| ROCKE | ELLER ARCHIVE CENTER | 20-803 |
| Statement 1 Form 990-PF, Part I, Line 16c Other Professional Fees | | |
| ADVISORY & PROFESSIONAL SUPPORT FACILITY DESIGN FINANCIAL SERVICES/INVESTMENT FEES Total | (a) (b) Net Expenses Investme Income \$ 214,700. | nt Adjusted Charitabl Net Income Purposes \$ 214,700. \$ 214,70 173,540. 173,54 |
| Statement 2 Form 990-PF, Part I, Line 18 Taxes | | |
| EXCISE TAXES Total | (a) (b) Net Expenses Investme Income \$ 115,000. \$ | nt Adjusted Charitabl |
| Statement 3 Form 990-PF, Part I, Line 23 Other Expenses | | |
| | (a) (b) Ne Expenses Investme per Books Incom | nt Adjusted Charitab |
| DIGITIZATION AND MICROFILMING MEMBERSHIPS MISCELLANEOUS POSTAGE AND SUPPLIES SCHOLARLY CONFERENCES & WORKSHOPS Total | \$ 136,746. 21,252. 124,409. 233,645. 94,802. \$ 610,854. \$ | \$ 136,746. \$ 136,74 21,252. 21,25 124,409. 233,645. 233,64 94,802. 94,80 0. \$ 610,854. \$ 486,44 |

Statement 4 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipment

| Category | Basis | Accum. Deprec. | Book Value | Fair Market Value |
|---|--|----------------|--|--|
| Machinery and Equipment Buildings Land Miscellaneous | \$ 263,710. 12,592,538. 4,838,000. 1,058,091. | 631,332. | \$ 263,710. 11,961,206. 4,838,000. 1,058,091. | \$ 263,710. 11,961,206. 4,838,000. 1,058,091. |
| Tot | | \$ 631,332. | \$ 18,121,007. | \$ 18,121,007. |

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|---|--|--|
| | ROCKEFELLER ARCHIVE CENTER | 20-8030810 |
| Statement 5 Form 990-PF, Part II, Line 15 Other Assets | | |
| MISCELLANEOUS | | |
| Statement 6 Form 990-PF, Part II, Line 22 Other Liabilities EXCISE TAXES PAYABLE DUE TO THE ROCKEFELLER UNIV | VERSITY | \$ 115,000. 1,153,324. |
| | Tota | 1 \$ 1,268,324. |
| Statement 7 Form 990-PF, Part III, Line 3 Other Increases NET UNREALIZED GAIN ON INVESPENDING RATE ADJUSTMENT FO | ESTMENTS OR FY 2009 & FY 2010 Tota | \$ 6,211,419. 1,774,077. \$ 7,985,496. |
| Statement 8 Form 990-PF, Part VI, Line 9 Tax Due Tax Due Late Filing Penalty | | \$ 42,464. 3,640. |
| Late Payment Penalty Late Interest | Tota | 1,443. 791. |

Statement 9 Form 990-PF, Part VII-A, Line 8b Copies of Form 990-PF to State Officials

NEW YORK STATE DEPARTMENT OF EDUCATION REQUIRES US TO INCLUDE ANNUAL REPORT INFORMATION AND 990-PF INFORMATION ONLY WITH AN APPROVED DEPARTMENT OF EDCUATION FORM.

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Statement 10 Form 990-PF, Part VII-A, Line 10 **Substantial Contributors During the Tax Year**

Name of Substantial Contributor Address of Substantial Contributor

THE ROCKEFELLER UNIVERSITY

1230 YORK AVENUE NEW YORK, NY 10065

Statement 11 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

| Name and Address | Title and Average Hours <u>Per Week Devoted</u> | Compen- sation | Contri- bution to EBP & DC | Expense Account/ Other |
|---|---|-------------------|----------------------------------|------------------------------|
| NEIL L. RUDENSTINE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Chairman 1.00 | \$ 0. | \$ 0. | \$ 0. |
| FRED BOHEN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Secretary 1.00 | 0. | 0. | 0. |
| STEPHEN HEINTZ 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Treasurer 1.00 | 0. | 0. | 0. |
| PAUL NURSE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Trustee 1.00 | 0. | 0. | 0. |
| DAVID ROCKEFELLER, JR 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Trustee 1.00 | 0. | 0. | 0. |
| JUDITH RODIN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Trustee 1.00 | 0. | 0. | 0. |
| MEGAN SNIFFIN-MARINOFF 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Trustee 1.00 | 0. | 0. | 0. |
| ERIC WANNER 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Trustee 1.00 | 0. | 0. | 0. |
| JACK MEYERS 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | President & CEO 35.00 | 197,500. | 64,657. | 4,775. |

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Federal Statements

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ROCKEFELLER ARCHIVE CENTER

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Statement 11 (continued) Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

| Name and Address | Title and Average Hours Per Week Devoted | Compen- sation | Contri- bution to EBP & DC | Expense Account/ Other |
|--|--|-------------------|----------------------------------|------------------------------|
| ROBERT D. ROSENDALE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | COO 35.00 | \$ 190,800. | \$ 54,241. | \$ 2,007. |
| JAMES A. SMITH 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591 | Vice President 35.00 | 159,000. | 36,376. | 1,935. |
| | Total | \$ 547,300. | \$ 155,274. | \$ 8,717. |

Statement 12 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

Care Of:

Street Address:

City, State, Zip Code:

Telephone:

Form and Content:

GRANT-IN-AID PROGRAM GRANTS ADMINSTRATOR

CAMILLA HARRIS 15 DAYTON AVENUE

SLEEPY HOLLOW, NY 10591

914-366-6311

GRANTEES COMPLETE A FOUR-PAGE APPLICATION AND MAIL IT TO THE ADDRESS PROVIDED ABOVE. APPLCANTS MAY ALSO E-MAIL AN

APPLICATION TO RACGRANTS@ROCKARCH.ORG

Submission Deadlines:

Restrictions on Awards:

NOVEMBER 15TH OF EACH CALENDAR YEAR. AWARDS ARE ANNO AWARDS ARE MADE TO INDIVIDUALS; INSTITUIONS ARE NOT AWARDS ARE ANNOUNCED

THE GRANT DOES NOT SUPPORT RESEARCH AT ELIGIBLE TO APPLY. OTHER INSTITUTIONS, AND IT DOES NOT PROVIDE GENERAL

TUITION SUPPORT. APPLICATION TO THE GRANT-IN-AID PROGRAM

IS OPEN TO U.S. CITIZENS AND CITIZENS OF FOREIGN COUNTRIES. CERTAIN U.S. GOVERNMENT REQUIREMENTS WILL

APPLY TO NON-U.S. CITIZENS.

Statement 13 Form 990-PF, Part XV, Line 3a **Recipient Paid During the Year**

| Name and Address | Donee Relationship | Found- ation Status | Purpose of Grant | Amount |
|------------------|-----------------------|---------------------------|---------------------|--------------|
| NICOLE PACINO | NONE | NONE | GRANT-IN-AID | \$ 2,342. |
| HAIPENG ZHOU | NONE | NONE | GRANT-IN-AID | 2,500. |

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| | ROCKEFELLER ARCHIVE CENTER | 20-8030810 |

Statement 13 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

| Name and Address | Donee Relationship | Found- ation Status | Purpose of Grant | Amount |
|------------------|-----------------------|---------------------------|---------------------|-----------|
| WEN HUA KUO | NONE | NONE | GRANT-IN-AID | \$ 5,000. |
| JAMIN ROWAN | NONE | NONE | GRANT-IN-AID | 1,253. |
| GRETA MARCHESI | NONE | NONE | GRANT-IN-AID | 1,863. |
| STEPHANIE KELLY | NONE | NONE | GRANT-IN-AID | 2,445. |
| MICHELE HILMES | NONE | NONE | GRANT-IN-AID | 2,078. |
| REIKO MAEKAWA | NONE | NONE | GRANT-IN-AID | 3,000. |
| WILLIAM BUXTON | NONE | NONE | GRANT-IN-AID | 2,500. |
| ANDREW HULL | NONE | NONE | GRANT-IN-AID | 2,500. |
| STEPHANIE BAKER | NONE | NONE | GRANT-IN-AID | 1,200. |
| GAIA CARAMELLINO | NONE | NONE | GRANT-IN-AID | 2,890. |
| DI YIN LU | NONE | NONE | GRANT-IN-AID | 2,500. |
| AMY MORAN THOMAS | NONE | NONE | GRANT-IN-AID | 1,250. |
| ANDREA RENNER | NONE · | NONE | GRANT-IN-AID | 452. |
| RHONDA JONES | NONE | NONE | GRANT-IN-AID | 1,892. |
| NICOLE BARNES | NONE | NONE | GRANT-IN-AID | 2,500. |
| ERNESTO CAPELLO | NONE | NONE | GRANT-IN-AID | 2,500. |
| ZEULLER R LIMA | NONE | NONE | GRANT-IN-AID | 2,165. |

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| | ROCKEFELLER ARCHIVE CENTER | 20-8030810 |

Statement 13 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

| Name and Address | Donee Relationship | Found- ation Status | Purpose of Grant | Amount |
|-------------------|-----------------------|---------------------------|---------------------|-----------|
| EDMUND RAMSDEN | NONE | NONE | GRANT-IN-AID | \$ 4,383. |
| JESSICA NEPTUNE | NONE | NONE | GRANT-IN-AID | 2,466. |
| BURTON CLEETUS | NONE | NONE | GRANT-IN-AID | 2,846. |
| STEPHANIE S BATOR | NONE | NONE | GRANT-IN-AID | 2,500. |
| KIVANC KILINC | NONE | NONE | GRANT-IN-AID | 965. |
| MELISSA WOOTEN | NONE | NONE | GRANT-IN-AID | 2,500. |
| SERVANDO ORTOLL | NONE | NONE | GRANT-IN-AID | 5,000. |
| FLORIS HEUKELOM | NONE | NONE | GRANT-IN-AID | 2,623. |
| A JOSEPH BORRELL | NONE | NONE | GRANT-IN-AID | 1,177. |
| MYTHELI SREENIVAS | NONE | NONE | GRANT-IN-AID | 892. |
| BRIAN ZUGAY | NONE | NONE | GRANT-IN-AID | 1,617. |
| SUSAN CHAMBRE | NONE | NONE | GRANT-IN-AID | 304. |
| NANCY LUTKEHAUS | NONE | NONE | GRANT-IN-AID | 4,864. |
| JOSEPH P CAREY | NONE | NONE | GRANT-IN-AID | 1,026. |
| GRETCHEN BOGER | NONE | NONE | GRANT-IN-AID | 337. |
| EVAN R WARD | NONE | NONE | GRANT-IN-AID | 2,500. |
| N W COLLINS | NONE | NONE | GRANT-IN-AID | 193. |

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Statement 13 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

| Name and Address PATRICIO DEL REAL | Donee <u>Relationship</u> NONE | Found- ation Status NONE | Purpose of Grant GRANT-IN-AID \$ | Amount 1,000. |
|------------------------------------|--------------------------------------|-----------------------------------|----------------------------------|------------------|
| REBECCA WILLIAMS | NONE | NONE | GRANT-IN-AID | 2,621. |
| CHRISTOPH GRADMANN | NONE | NONE | GRANT-IN-AID | 1,248. |
| FLORIAN MILDENBERGER | NONE | NONE | GRANT-IN-AID | 1,725. |
| , | | | Total 🛐 | 85,617. |