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SCANNED MAY 3 1 2011

Department of the Treasury Internal Revenue Service

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

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

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

OMB No 1545-0047 2010 Open to Public Inspection

Ā	For the 2010 c	elendar year, or tax year beginning , and ending			<del></del>		
В	Check if applicable	C Name of organization Fund for the European University at		D Employe	er identification number		
	Address change	St. Petersburg					
П	Name change	Doing Business As			780793		
$\overline{\sqcap}$	Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephor			
H		1825 Encore Lane		/34-	730-9695		
	Terminated	City or town, state or country, and ZIP + 4		<b>.</b>	. 7 304 104		
Ш	Amended return	Ann Arbor MI 48103	<del></del>	G Gross receipt	s\$ 7,384,194		
	Application pending	F Name and address of principal officer	H(a) Is this a g	group return for affil	iates? Yes X No		
		William G Rosenberg	H(b) Are all a	affiliates include	d? Yes No		
		1825 Encore Lane   Ann Arbor MI 48103	. ,		(see instructions)		
_	<b>T</b>		-{		•		
÷	Tax-exempt stat Website: ▶		H(c) Group 4	exemption numb	ner 🕨		
	Form of organizatio		ear of formation 2		State of legal domicile MI		
		ummary	ear or iorniauori —	1111	• ·		
	<del></del>	escribe the organization's mission or most significant activities					
		provide financial support through grants for educat:	ional. re	search.	and		
ဦ		inistrative programs in the social sciences and huma					
Activities & Governance		opean University at St. Petersburg, Russia.	mircres u				
Ver		nis box   if the organization discontinued its operations or disposed of more than 25	:0/ of its not so	aata			
ဖိ			176 OF ILS FIEL AS		6		
<b>ජ</b>		of voting members of the governing body (Part VI, line 1a)			<del></del>		
Ęį		of independent voting members of the governing body (Part VI, line 1b)		<del></del>	0		
ξį		mber of individuals employed in calendar year 2010 (Part V, line 2a)		6	<u> </u>		
¥	!	mber of volunteers (estimate if necessary)		<del></del>	<del>.</del>		
	1	related business revenue from Part VIII, column (C), line 12		7a   7b	0		
	b Net unr	elated business taxable income from Form 990-T, line 34	Prior Ye		Current Year		
	8 Contribu	itions and grants (Part VIII, line 1h)		1,478	4,503,646		
ī	I .	service revenue (Part VIII, line 2g)					
Revenue	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)	4	5,377	443,631		
æ	1	venue (Part VIII, column (A), lines 5, 6 <u>d, 8c, 9c, 10c, and 11e)</u>		<del>-,</del>			
		venue – add lines 8 through 11 (must equal Par VIII) column (A) line 12)	4.45	6,855	4,947,277		
				2,077	706,487		
		101 101					
	15 Salaries	paid to or for members (Part IX, column (A), line 4)  other compensation, employee benefits (Part IX, column (A), lines 5 10)					
penses	16a Profess	onal fundraising fees (Part IX, column (A), fine 11e)					
Je n			<del>.</del>				
Ä	17 Other e	ndraising expenses (Part IX, column (D), line 23) CDEN.	1	8,641	32,058		
		penses Add lines 13–17 (must equal Part IX, column (A), line 25)		0,718	738,545		
		e less expenses Subtract line 18 from line 12		6,137	4,208,732		
2 8	3	s less expenses oubtract line to norm line 12	Beginning of Cu		End of Year		
Net Assets or	20 Total as	sets (Part X, line 16)	6,54	8,632	10,999,256		
ASS	21 Total lia	bilities (Part X, line 26)		0	0		
S S	22 Net ass	ets or fund balances Subtract line 21 from line 20	6,54	8,632	10,999,256		
		ignature Block					
U	nder penalties of	penury, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of	of my knowledge	e and belief, it is		
tro	ue, correct, and o	omplete Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowledge				
				5-	9-2011		
Sig	gn 📗	Signature of officer		Date			
He	-   .	William G <sup>l</sup> Rosenberg Presi	dent				
		Type or print name and title					
	Print/T	rpe preparer's name  H. Bennett CPA  James H. Bennett CPA  James H. Bennett CPA	O Co Pate	Check	if PTIN		
Pai	d James	H. Bennett CPA James H. Bennett CPA	05/04	1/11 self-emp	loyed P00447547		
Pre	parer Firm's	Description CDA to DITC		Firm's EIN	27-3488128		
Use	e Only	100 Huronview Blvd Ste 200					
	Firm's	address Ann Arbor, MI 48103-2946		Phone no	734-622-7000		
May		ss this return with the preparer shown above? (see instructions)			X Yes No		
		adjustion Act Notice, one the congrete instructions			Form 990 (2010)		

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Form 990 (2010) Fund for the European University at 59-3780793	Page <b>2</b>
Part III Statement of Program Service Accomplishments	
Check if Schedule O contains a response to any question in this Part III	X
1 Briefly describe the organization's mission To provide financial support through grants for educational, researc administrative programs in the social sciences and humanities at the European University at St. Petersburg, Russia.	h, and
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O	Yes X No
4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	•
4a (Code ) (Expenses \$ 403,356 including grants of \$ 403,356 ) (Revenue \$ Grant to the European University at St. Petersburg to support the institutional and program costs for two years of a new center for the of the rule of law.	e study
4b (Code ) (Expenses \$ 6,000 including grants of \$ 6,000 ) (Revenue \$ Grants to the European University at St. Petersburg for its Judaica Studies Program. These were made to meet program needs and properly expended.	)
4c (Code ) (Expenses \$ 297,131 including grants of \$ 297,131 ) (Revenue \$ Grants to the European University at St. Petersburg to meet regular program needs. These grants were used to	)
support the university's 2008-2009 general budget.	
4d Other program services (Describe in Schedule O )	
(Expenses \$ 3,109 including grants of \$ ) (Revenue \$ )	<u>-</u>
4e Total program service expenses ▶ 709,596	

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	candidates for public office? If "Yes," complete Schedule C, Part I	3	$\dashv$	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			x
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,	5		x
	Part III	3		
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,"	6		X
7	complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
0	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
3	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
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	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		İ	
	complete Schedule D, Part VI	11a		X
b	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	11b		X
С	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	11c		X
d	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			37
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		14a		_X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	445		x
4.5	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5	x	
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	-10		
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
. •	If "Yes," complete Schedule G, Part III	19		X
20a		20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form 990 (2010) Fund for the European University at 59-3780793

Part IV Checklist of Required Schedules (continued)

	art IV Checkinst of Required Schedules (Continued)	$\overline{}$		
24	Pullable assessmentary assess they \$5,000 of exempte and other appropriate and organizations		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	ł	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	<del></del>		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
		23		x
240	employees? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		x
_	through 24d and complete Schedule K. If "No," go to line 25.  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
b		240		
С	•	24c	ļ '	1
_	to defease any tax-exempt bonds?	24d		
d 25-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	2.40		
25a		25a		X
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	234	<del>                                     </del>	
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		Ì	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		х
26	If "Yes," complete Schedule L, Part I  Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	200		
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
27	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
		27		X
28	If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	- {		
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
a	and the second s	200		
b	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	100		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive more than \$25,000 in non-cash contributions. In Tes, complete concedure with Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
30	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	"		
31	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>	Ì	
32	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
55	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
04	IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a			
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,		ŀ	
	Part V, line 2	اه		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	$\mathbb{L}_{-}$	X
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	<u>L</u> _	X
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	Х	
		For	n 990	(2010

ra		if Schodulo O contains a room	•	Oart \/				$\Box$
	Cneci	if Schedule O contains a resp	onse to any question in this F	dit V			Yes	No
1a	Enter the number	reported in Box 3 of Form 1096 Enter -	-0- if not applicable	1a	0		1.00	
b		of Forms W-2G included in line 1a Ent	• •	1b	0		İ	ŀ
С	Did the organizati	on comply with backup withholding rule:	s for reportable payments to vendors a	and				
	reportable gaming	(gambling) winnings to prize winners?				1c		ļ
2a	Enter the number	of employees reported on Form W-3, T	ransmittal of Wage and Tax					
	Statements, filed	or the calendar year ending with or with	nin the year covered by this return	2a	0			]
b	If at least one is r	ported on line 2a, did the organization	file all required federal employment ta	x returns?		2b		<b>↓</b>
		f lines 1a and 2a is greater than 250, yo	- · · · · · · · · · · · · · · · · · · ·				ļ	
3a	-	n have unrelated business gross incon				3a_		X
b		l a Form 990-T for this year? If "No," pr	· ·			<u>3b</u>		<del> </del>
4a	-	the calendar year, did the organization			ty		İ	1
		count in a foreign country (such as a b	ank account, securities account, or ot	her financial				x
	account)?					4a_	-	<del>  ^</del>
b		name of the foreign country	22.4. Danest of Foreign Book and Fin	anaial Aasaii	-t-			
5a		r filing requirements for Form TD F 90-			iits	5a		x
b		on a party to a prohibited tax shelter transfer to ity notify the organization that it was or				5b	<del>  -</del>	X
C		or 5b, did the organization file Form 888		ansaction.		5c	_	<del> </del>
6a		tion have annual gross receipts that are		l did the			_	
-		any contributions that were not tax dec				6a		x
b	<del>-</del>	ganization include with every solicitation		tributions or				
	gifts were not tax	-				6b		
7	Organizations th	t may receive deductible contribution	ns under section 170(c).					П
а	_	in receive a payment in excess of \$75 i		ly for goods				ł
	and services prov	ded to the payor?				7a		X
b	If "Yes," did the or	ganization notify the donor of the value	of the goods or services provided?			7b		
C	Did the organizati	n sell, exchange, or otherwise dispose	of tangible personal property for which	h it was				
	required to file Fo	m 8282?		1 1		7c		X
d		e number of Forms 8282 filed during the		7d	<del> </del>			۱
е		n receive any funds, directly or indirect			?	7e_		X
f		n, during the year, pay premiums, dire				7f		X
g	_	received a contribution of qualified inte				7g	<u> </u>	⊢
h		received a contribution of cars, boats,			e a Form 1098-C?	7h_		┼
8		nizations maintaining donor advised t	* * * * * * * * * * * * * * * * * * * *	_				1
	•	I the supporting organization, or a dono		soring		8		x
9		excess business holdings at any time				-	$\vdash$	1
a		nizations maintaining donor advised t In make any taxable distributions under				9a		X
b	-	in make a distribution to a donor, donor				9b	t —	X
10	•	organizations. Enter	davisor, or related person			<u> </u>		<del>                                     </del>
а		capital contributions included on Part V	/III line 12	10a				
b		luded on Form 990, Part VIII, line 12, f	,	10b	_		1	i
11		organizations. Enter						]
а		n members or shareholders		11a				
b	Gross income from	n other sources (Do not net amounts du	ue or paid to other sources					
	against amounts	ue or received from them )		11b				
12a	Section 4947(a)(1	non-exempt charitable trusts. Is the	organization filing Form 990 in lieu of	Form 1041?		12a		
b		amount of tax-exempt interest received		12b				
13	Section 501(c)(29	qualified nonprofit health insurance	issuers.					<u> </u>
а	Is the organization	licensed to issue qualified health plans	s in more than one state?			13a	ļ	
	Note. See the ins	uctions for additional information the o	rganization must report on Schedule (	)				
b	Enter the amount	of reserves the organization is required	to maintain by the states in which	1 1				
	the organization is	licensed to issue qualified health plans	<b>S</b>	13b			1	
С		of reserves on hand		13c			<u> </u>	<del> </del>
14a		n receive any payments for indoor tann				14a	L	X
<u>b</u>	It "Yes," has it file	a Form 720 to report these payments	? If "No," provide an explanation in Sc	hedule O	<del> </del>	14b	1	(2010

_	1 990 (2010) Fund for the European University at 59-3780793			age <b>6</b>
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b belonger	ow, an	d for	a
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	5 IN 50	neau	lie
	O See instructions.			X
	Check if Schedule O contains a response to any question in this Part VI			
sec	tion A. Governing Body and Management		Yes	No.
4.	Enter the number of voting members of the governing body at the end of the tax year   1a   6		163	110
1a	Zitter the manager of toxing members of the general part of the first part of the fi	1		
ь 2	Enter the number of voting members included in line 1a, above, who are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
-	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
,	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	ľ	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		$\overline{\mathbf{x}}$
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X X X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			_
,,,	of the governing body?	7a	1	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following	Ì		
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Cod	e.)	
	ton bir onote (Time coction b requeste information about pointer increase) increase in		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		$\overline{\mathbf{x}}$
	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		
11a				
–	form?	11a	x	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a		12a	x	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	x	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
-	describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	}		
а	The organization's CEO, Executive Director, or top management official	15a		X
b		15b		X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1		
	with a taxable entity during the year?	16a		X
ь	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ MI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
	for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
-	and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ WILLIAM G. ROSENBERG 1825 ENCORE LANE			
Ar		4-76	<u>9-3</u>	064

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Form 990 (2010) Fund for the European University at 59-37807	Form 990 (2010)	Fund for	the	European	University	at	59-378079
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Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

X Check this box if neither the orga	anization nor an	y rela	ted	orga	nıza	tions c	om	pensated any current offic	er, director, or trustee	
(A) Name and Title	(B) Average			chec	C) k all t	that app	ly)	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Prof William G F								_		
President	1.00	X		X			_	0	0	0
(2) Prof Harley Bala										•
Treasurer	1.00	X		X	_	—	_	0	0	0
(3) Prof Gail Lapidu									•	^
Secretary	1.00	X		X			$\dashv$	0	0	0
(4) Prof Loren Graha	1 00							0	0	0
Director (5) Wm. Newton-Smith	1.00	X					$\dashv$			
Director	1.00	x					ĺ	0	o	0
(6) Rector Oleg Khan		-			<del>                                     </del>	l	$\dashv$			
Director	1.00	x			ŀ			0	0	0
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

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_Pa	rt VII Section A. Officers	, Directors, Trus	stees	s, Ke	y Er	nplo	yees	s, ar	nd Highest Compensated	Employees (continued)			_			
	(A) Name and Title	(B) Average	Pos	ition (	chec	C) k all	that a		(D) Reportable compensation	(E)  Reportable compensation from	Estima	(F) Estimated amount of				
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	othi compen from organiz and rei organiza	er sation the ation lated				
(17)								_				_				
(18)																
(19)	· · · · · · · · · · · · · · · · · · ·	-														
(20)																
(21)					-											
(22)					}	-										
(23)																
(24)		-					_									
(25)																
(26)				-												
(27)									,		-					
(28)																
1b	Sub-total		J				<u> </u>	<b>•</b>								
C	Total from continuation she	ets to Part VII, S	ectio	on A												
<u>d</u> _2	Total (add lines 1b and 1c)  Total number of individuals (iii				thos	e lis	ted a	bov	ve) who received more than	\$100,000 in	<u> </u>					
	reportable compensation from	tne organizatioi	1 💌	<u> </u>		_						Yes	No			
3	Did the organization list any feemployee on line 1a? If "Yes,								oyee, or highest compensa	ted	3		х			
4	For any individual listed on lin organization and related orga	e 1a, is the sum	of re	port	able	con	pen	satio					v			
5	individual  Did any person listed on line for services rendered to the o									r ındıvıdual	5		X			
Sec	tion B. Independent Contract		<b>C</b> 3,	COIL	ipici	. 00	, icac	100	Tor Such person	· -		•				
1	Complete this table for your fi compensation from the organ	ive highest comp	ensa	ited	ınde	pend	dent o	cont								
	Name and	(A) d business address					-	-	Descrip	(B) otion of services	<u>a</u>	(C) ompensa	ation			
		_						-								
_		·														
								-		· · · · · · · ·						
								-								
						lues 1		1.	and hada district.							
2	Total number of independent received more than \$100,000								ese listed above) who	0		000	1,6			
DAA											Forr	ก ษษ0	(2010			

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Total revenue Related or Unrelated by Management of the Community of the C	art \	<u>t V</u>	III Statement	t of Reve	nue						
1a Federated campagns   1a	•							(A) Total revenue	function	business	(D) Revenue excluded from tax under sections
Towestment income (including dividends, interest, and other similar amounts)   181,389   181					- 1				revenue		512, 513, or 514
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	<u> </u>			gns							
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	<u> </u>		·								
3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax-exempt bond proceeds ►  5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross samount from seasor diseases (iii) Other diseases diseases (iii) Other sales diseases other than inventory  basis sales exps 2, 436, 917  c Gain or (loss) 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ⇒ 262, 242  d Net gain or	<u> </u>		•	ľ							
3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax-exempt bond proceeds ►  5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross samount from seasor diseases (iii) Other diseases diseases (iii) Other sales diseases other than inventory  basis sales exps 2, 436, 917  c Gain or (loss) 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ⇒ 262, 242  d Net gain or	<u> </u>		•	ľ							
3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax-exempt bond proceeds ►  5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross samount from seasor diseases (iii) Other diseases diseases (iii) Other sales diseases other than inventory  basis sales exps 2, 436, 917  c Gain or (loss) 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ⇒ 262, 242  d Net gain or	<u> </u>		= ;		1e						
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	<u> </u>	f			4.		E02 646				
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	3	_		ι			303,646				
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	8	_				Þ		4.503.646			
3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax-exempt bond proceeds ►  5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross samount from seasor diseases (iii) Other diseases diseases (iii) Other sales diseases other than inventory  basis sales exps 2, 436, 917  c Gain or (loss) 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ⇒ 262, 242  d Net gain or	十		Total: Add lines ta	<u> </u>			Busn. Code	270007000			
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	2	2a	l								
Towestment income (including dividends, interest, and other similar amounts)   181,389   181	1										
3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax-exempt bond proceeds ►  5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross samount from seasor diseases (iii) Other diseases diseases (iii) Other sales diseases other than inventory  basis sales exps 2, 436, 917  c Gain or (loss) 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ⇒ 262, 242  d Net gain or	(	С	;								
3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax-exempt bond proceeds ►  5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross Rents (iii) Real (iii) Personal  6a Gross samount from seasor diseases (iii) Other diseases diseases (iii) Other sales diseases other than inventory  basis sales exps 2, 436, 917  c Gain or (loss) 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ≥ 262, 242  d Net gain or (loss) ⇒ 262, 242  d Net gain or		d	l								
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A Income from investment of tax-exempt bond proceeds  Royalities  (i) Real (ii) Personal  6a Gross Rents b Less rental exps c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis & sales exps 2 , 436 , 917 c Gain or (loss) 2 62 , 242 d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a Less direct expenses b C Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a	3	3			dividen	ds, intere	est,	101 000			101 200
S Royalties	١.	_		•			. •	181,389			181,389
(i) Real   (ii) Personal	1			ment of tax-	-exem	pt bond p	roceeds P				
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b Less rental exps c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets other than inventory b Less cost or other basis & sales exps 2,436,917 c Gain or (loss) 262,242 d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from garning activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from garning activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from garning activities see Part IV, line 19 a b Less direct expenses c Net income or (loss) from garning activities returns and allowances a		٠.	Crass Basta	(i) Real		(11) F	eisoliai				
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Ta Gross amount from sales of assets other than inventory 2, 699, 159  b Less cost or other basis & sales exps c Gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances				or (loss)					,		
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b Less cost or other basis & sales exps  c Gain or (loss)  262,242  d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c)  See Part IV, line 18  a Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities  See Part IV, line 19  a Less direct expenses b C Net income or (loss) from gaming activities  See Part IV, line 19  b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  a less direct expenses b C Net income or (loss) from gaming activities						``					
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C Gain or (loss)  262,242  d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses c Net income or (loss) from gaming activities  9a Gross sales of inventory, less returns and allowances  262,242  262  262  262  262  262  262				2,436,	917						
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c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a			of contributions reporte	ed on line 1c)	1						
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a			See Part IV, line 18		а						
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See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  a	1				r	events					
b Less direct expenses b  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a	98	9a	_	ming activities							
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10a Gross sales of inventory, less returns and allowances a			<del>-</del>								
returns and allowances a				-	ing act	tivities	<u> </u>			-	
	10	10a		-	_ ]						
	Ι.	L									
					b l	·onton					
c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code	۲	<u> </u>				remory	Busn. Code				
11a	11	112									
b little											
c c								-			<del></del>
d All other revenue			All other revenue								
e Total. Add lines 11a–11d				a–11d			<u> </u>				
12 Total revenue. See instructions <b>&gt;</b> 4,947,277 0 0 443	12	12_	Total revenue. See	e instruction	s		<b></b> _	4,947,277	0	0	443,631

### Form 990 (2010) Fund for the European University at 59-3780793

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	All other organizations must				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				-
	the U.S. See Part IV, line 22	,			
3	Grants and other assistance to governments,		"		
•	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16	706,487	706,487		
4	Benefits paid to or for members	70,07501	700/201		
-	•				<del></del>
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				_
7	Other salaries and wages			<u></u>	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				<u> </u>
10	Payroll taxes				
11	Fees for services (non-employees)		l		
а	Management				
b	Legal				
С	Accounting	9,566		9,566	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	14,697		14,697	
g	Other				
12	Advertising and promotion	3,109	3,109		
13	Office expenses	32		32	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
			·		
18	Payments of travel or entertainment expenses			İ	
40	for any federal, state, or local public officials	3.649	+	3,649	
19	Conferences, conventions, and meetings	3,049		3,045	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O)				
а	Subscription	1,005	<u></u> _	1,005	
b					
С					
d					
e					
f	All other expenses				<del>_</del> :-
25	Total functional expenses. Add lines 1 through 24f	738,545	709,596	28,949	0
26	Joint costs. Check here	. 55,525	,		<u> </u>
20	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				
DAA	campaign and fundraising solicitation		<del></del>		Form <b>990</b> (2010)

Part 2	X Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing	17,653	1	92,819
2	Savings and temporary cash investments	36,705	2	35,961
3	Pledges and grants receivable, net	609,033	3	1,774,757
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of		ļ	
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section		:	
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		1	
<u>"</u>	employees' beneficiary organizations (see instructions)		6	
<b>#</b> 7	Notes and loans receivable, net		7	
Assets	Inventories for sale or use		8	
<b>~</b>   9	Prepaid expenses and deferred charges		9	
10a	a Land, buildings, and equipment cost or		l	
	other basis Complete Part VI of Schedule D 10a		- 1	
b	Less accumulated depreciation 10b		10c	<u> </u>
11	Investments—publicly traded securities	5,885,241	11	9,095,719
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	6,548,632	16	10,999,256
17	Accounts payable and accrued expenses		17	<u></u>
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
<u>8</u> 21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
<b>=</b>   22	Payables to current and former officers, directors, trustees, key		i	
Liabilities 22 22 22 22 22 22 22 22 22 22 22 22 22	employees, highest compensated employees, and disqualified persons		ĺ	
ت	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	<u> </u>	23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0	26	0
Se	Organizations that follow SFAS 117, check here ▶ 🗷 and complete			
8 27 28 28	lines 27 through 29, and lines 33 and 34.	25 225	1	100 701
<u>g</u>   27	Unrestricted net assets	37,335	27	128,781
	Temporarily restricted net assets	722,430	28	807,529
일 29	Permanently restricted net assets	5,788,867	29	10,062,946
ヹ゠	Organizations that do not follow SFAS 117, check here ▶ ☐ and		ļ	
ō	complete lines 30 through 34.		_	
တ္က 30	Capital stock or trust principal, or current funds	<u> </u>	30	
8 31	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31	
Net Assets or Fund 30 31 32 33 34	Retained earnings, endowment, accumulated income, or other funds	6 540 630	32	10 000 050
<b>5</b> 33	Total net assets or fund balances	6,548,632	33	10,999,256
<b>Z</b> 34	Total liabilities and net assets/fund balances	6,548,632	34	10,999,256

Form **990** (2010)

Form 990 (2010) Fund for the European University at 59-3780	793		Pa	ge <b>12</b>
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part X	<u>( </u>			
1 Total revenue (must equal Part VIII, column (A), line 12)	[ 1 ]	4,9	47,	277
2 Total expenses (must equal Part IX, column (A), line 25)	2	7	38,	545
Revenue less expenses Subtract line 2 from line 1	3_	4,2	08,	732
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,5	48,	632
Other changes in net assets or fund balances (explain in Schedule O)	5_	2	41,	892
Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				_
column (B))	6	10,9	99,:	<u> 256</u>
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part X	(II			
			Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other				
If the organization changed its method of accounting from a prior year or checked "Other," explain in				
Schedule O				
Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b Were the organization's financial statements audited by an independent accountant?		2b	X	Ĺ
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	sight			
of the audit, review, or compilation of its financial statements and selection of an independent accour	ntant?	2c	X	<u> </u>
If the organization changed either its oversight process or selection process during the tax year, expla	ain in			
Schedule O				
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year w	<i>r</i> ere			
issued on a separate basis, consolidated basis, or both				
X Separate basis Consolidated basis Both consolidated and separate basis				
Ba As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ı ın		į	
the Single Audit Act and OMB Circular A-133?		3a_		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	the			
required audit or guidits, explain why in Schedule O and describe any steps taken to undergo such au		36		

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Fund for the European University at St. Petersburg

Employer identification number 59-3780793

The	orga	nization is not	a private foundation be	caus	e it is (For lines 1 through 11	, check onl	y one box	)					
1		A church, co	nvention of churches, o	rass	ociation of churches describe	d ın sectio	n 170(b)(1	)(A)(i).					
2	П	A school des	cribed in section 170(t	)(1)(/	A)(ii). (Attach Schedule E)								
3	П	A hospital or	a cooperative hospital	servi	ce organization described in s	ection 170	(b)(1)(A)(i	iii).					
4	П	A medical re	search organization op	erated	d in conjunction with a hospita	I described	ın sectio	n 170(b	)(1)(A)(i	ii). Ente	r the ho	spital's name,	
		city, and stat	e		-								
5		-		nefit c	of a college or university owne	d or operat	ed by a g	overnme	ental uni	t descri	bed in		
	_	-	b)(1)(A)(iv). (Complete										
6		,			overnmental unit described in	section 17	<sup>7</sup> 0(b)(1)(A	)(v).					
7	П	· ·		_	substantial part of its support				from the	genera	i public		
•		-	section 170(b)(1)(A)(v			Ū					•		
8	$\Box$				70(b)(1)(A)(vi). (Complete Pa	urt II )							
9	H	•			1) more than 33 1/3% of its su		contributi	ons. me	mbershi	p fees.	and gros	SS	
v	ш				npt functions—subject to certa								
					nd unrelated business taxable								
					0, 1975 See section 509(a)(2				.,				
10					exclusively to test for public s								
11	X	•	•		exclusively for the benefit of, t	•				v out the			
• •					ed organizations described in								
					he type of supporting organization								
		a Type	( <del></del>		c Type III–Function			d l	$\overline{}$	e III–Ot	her		
_	X	· ·			anization is not controlled dire							s.	
e	22				er than one or more publicly si								
		or section 50		. 00110	i than one or more publicly of	apportou o	gumzanor	.0 0000,				,	
f			· /· /	dete	rmination from the IRS that it	ıs a Tyne İ	Type II	or Type	III suppe	ortina			
•		_	check this box	ucic		is a Type i	, 1 <b>ypc</b> 11,	J. 19PC	ш оорр	Jiting .		ĺ	П
_		-		20172	tion accepted any gift or contr	abution from	n any of th	10				l	Ш
g		_	_	allizai	tion accepted any girt or conti	ibulion noi	il ally of a						
		following per		مم داله	naturala, author ologo or togotho	e with nore	one docor	ıbadın (	u) and			Yes	No
		• • •	~	•	ontrols, either alone or togethe	i witii peis	ons descr	ibea iii (	ii) aliu				X
					supported organization?							_***	$\frac{x}{x}$
			member of a person d		• •							) - " · · · · · · · · · · · · · · · · · ·	X
					described in (i) or (ii) above?							[119(11)]	
<u>n</u>	NI			out ti	he supported organization(s)	(by) to the		(v) Dela	ou notify	T 660	s the	(vii) Amount of	
(1)		e of supported janization	(iı) EIN	i	(iii) Type of organization (described on lines 1–9	1	organization isted in your		nization in	organizat		support	
		,			above or IRC section		document?		of your	(i) organi		••	
					(see instructions))	Vos	No	Yes	port?	<del></del>	No No		
<del></del>	F		IInironai t	- L	St Potoschus	Yes	No	1 62	No	Yes	140		—
(A)	EU	ropean	University	at	St. Petersburg	3   x		x			x	706,4	Ω7
						<del></del>	<del> </del>	^			<del>  ^  </del>	700,4	<del>0 /</del>
(B)										1	1		
							<u> </u>		-	├			
(C)													
							<del> </del>				+		
(D)											ŀ		
						<u> </u>			ļ		$\vdash$		
(E)													
		<del></del> .					<u> </u>		<del></del>	<u> </u>	$\vdash$		
												706 4	07
Tota	<u> </u>		<u> </u>					L		<u> </u>		706,4	<u>0 /</u>

Schedule A (Form 990 or 990-EZ) 2010 Fund for the European University at 59-3780793

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	membership fees received (Do not include any "unusual grants")						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	membership fees received (Do not						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					:	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support			l <u></u>	<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10					<u> </u>	
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first	, second, third, fo	urth, or fifth tax ye	ar as a section 501	(c)(3)	_
	organization, check this box and stop here						<b>•</b>
Sec	tion C. Computation of Public Sι	ipport Percen	tage			,	
14	Public support percentage for 2010 (line 6		-	nn (f))		14	
15	Public support percentage from 2009 Scho					15	<u></u>
16a	33 1/3% support test—2010. If the organi				33 1/3% or more, o	heck this	
	box and stop here. The organization quali	fies as a publicly s	upported organiza	ition			▶ ∐
b	33 1/3% support test—2009. If the organi	zation did not ched	ck a box on line 13	3 or 16a, and line 1	15 is 33 1/3% or m	ore,	
	check this box and stop here. The organiz	•		•			▶ ∐
17a	10%-facts-and-circumstances test—201	•		· ·	•		
	10% or more, and if the organization meet						
	Part IV how the organization meets the "fa organization					•	▶ 🗌
b	10%-facts-and-circumstances test—200	ŭ		•			
	15 is 10% or more, and if the organization				<del>-</del>		
	Explain in Part IV how the organization me supported organization	eets the "facts-and	-circumstances" te	est The organizati	on qualifies as a p	ublicly	▶ □
18	Private foundation. If the organization did	I not check a hovid	on line 13 16a 16	h 17a or 17h cha	eck this how and se	ee.	<b>-</b> L
.0	instructions	HOL CHECK & DUX C	iiiic 10, 10a, 10	5, 176, 01 175, OR	DON GING DON GING SC	•	▶ 🗌

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization falls to	o quality under	the tests liste	d below, pleas	e complete Pa	art II.)	
	tion A. Public Support	1	1 (1) 2007		4 13 0000	T (a) 2010	(A T-4-1
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				-		
3	Gross receipts from activities that are not an unrelated trade or business under section 513				Mana sa		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	_					<del></del>
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		_	,			
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax yea	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						<u> </u>
<u>Sec</u>	tion C. Computation of Public Su					<del></del>	
15	Public support percentage for 2010 (line 8			nn (f))		15	<u>%</u>
16	Public support percentage from 2009 Sch					16	%
Sec	tion D. Computation of Investme					· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 2010 (I			3, column (f))		17	
18	Investment income percentage from 2009			44 11 15			<u>%</u>
19a	33 1/3% support tests—2010. If the organ						
1-	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests—2009. If the organine 18 is not more than 33 1/3%, check the						▶ □
20	Private foundation. If the organization did						

Schedule A (Form 990 or 990-EZ) 2010 Fund for the European University at 59-3780793

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2010

Open to Public Inspection

	e of the organization		Employer identification	on number
	und for the European University at		50 2700702	
	t. Petersburg		59-3780793	-4- :f 4b -
Pi	organizations Maintaining Donor Advised Fu organization answered "Yes" to Form 990, Par	nds or Other Similar Funds or IV, line 6.	Accounts. Comple	ete if the 
		(a) Donor advised funds	(b) Funds and oth	er accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised	_	
	funds are the organization's property, subject to the organization's exc	lusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or don	or advisor, or for any other purpose	r	
	conferring impermissible private benefit?			Yes No
<u> Pa</u>	art II Conservation Easements. Complete if the org	anization answered "Yes" to Fo	<u>rm 990, Part IV, lir</u>	<u>ie 7</u>
1	Purpose(s) of conservation easements held by the organization (check	all that apply)		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically in	mportant land area	
	Protection of natural habitat	Preservation of a certified history	rıc structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a cons	servation	
	easement on the last day of the tax year			
			Held at the E	nd of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic structure inc	luded in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17	06, and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiz	ation during the	
	tax year ▶			
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mon	itoring, inspection, handling of	ſ	¬., ¬.,
_	violations, and enforcement of the conservation easements it holds?		l	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easements during the	year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year	•	
_	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)	) I	7 vaa
_	(i) and section 170(h)(4)(B)(ii)?			_  Yes    No
9	In Part XIV, describe how the organization reports conservation easem	•		
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	organization's imancial statements that	describes the	
	art III Organizations Maintaining Collections of Art,	Historical Treasures or Other	Similar Accets	
Г	Complete if the organization answered "Yes" to		Jililiai Assets.	
12	If the organization elected, as permitted under SFAS 116 (ASC 958), r		t halance sheet	
ıa	works of art, historical treasures, or other similar assets held for public			
	public service, provide, in Part XIV, the text of the footnote to its finance			
h	If the organization elected, as permitted under SFAS 116 (ASC 958), t			
	works of art, historical treasures, or other similar assets held for public			
	public service, provide the following amounts relating to these items	Samuel, Samuel, Samuel, Milate		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$	
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$	
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial dain in	rovide the	
-	following amounts required to be reported under SFAS 116 (ASC 958)	- ·		
9	Revenues included in Form 990, Part VIII, line 1	reading to those terms	<b>&gt;</b> \$	
a h	Assets included in Form 990, Part X		<b>▶</b> \$	

	dule D (Form 990) 2010 Fund for t							age 2
	rt III Organizations Maintaining					(contin	ued)	
3	Using the organization's acquisition, accession collection items (check all that apply)	n, and other records, chec	k any of the followir	ng that are a significant	t use of its			
а	Public exhibition	d 🗌 Loan o	r exchange program	ıs				
b	Scholarly research	e 🔲 Other						
C	Preservation for future generations							
4	Provide a description of the organization's colle	ections and explain how t	hey further the orga	nization's exempt purp	ose in Part			
	XIV							
5	During the year, did the organization solicit or i	receive donations of art, I	nistorical treasures,	or other similar			_	_
	assets to be sold to raise funds rather than to t					Ye	_	No
Pa	rt IV Escrow and Custodial Arrai	ngements. Complet	e if the organiza	ation answered "Y	es" to Form 9	90, Pa	rt IV	,
	line 9, or reported an amoun	t on Form 990, Par	t X, line 21					
1a	Is the organization an agent, trustee, custodiar	or other intermediary for	r contributions or oth	er assets not			_	,
	included on Form 990, Part X?					∐ Y€	es L	No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following	table					
						Amoun	<u>t</u>	
C	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1 <u>f</u>			<del>-</del>
	Did the organization include an amount on For	m 990, Part X, line 21?				Ye	es L	J No
	If "Yes," explain the arrangement in Part XIV				<del></del>			
<u>Pa</u>	rt V Endowment Funds. Comple							
		(a) Current year	(b) Prior year		(d) Three years back	(e) Fou	r years	back
	Beginning of year balance	5,896,242	2,033,757	50,446				
	Contributions	4,274,079	3,587,921	1,100,500				
С	Net investment earnings, gains, and							
	losses	645,607	579,564	-167,189				
	Grants or scholarships	147,131	305,000		·. ·			
е	Other expenditures for facilities and							
_	programs							
f	Administrative expenses	40.000	5 000 040	000 ===				
g	End of year balance	10,668,797	5,896,242	983,757				
2	Provide the estimated percentage of the year e							
	Board designated or quasi-endowment ▶	%						
	Permanent endowment ► 100.00 %							
_	Term endowment ▶ %							
за	Are there endowment funds not in the possess	ion of the organization th	at are held and adm	inistered for the		1		T
	organization by					0-0	Yes	No
	(i) unrelated organizations					3a(i)	_	X
L	(ii) related organizations		-d-1- D2			3a(ii)	_	X
D	If "Yes" to 3a(ii), are the related organizations I	•				3b		!
 	Describe in Part XIV the intended uses of the c						_	
<u> </u>	rt VI Land, Buildings, and Equip  Description of investment		(b) Cost or other		nulated	(d) Book	value	
	Description of investment	(a) Cost or other basis (investment)	(other)	basis (c) Accum depreci		(a) Book	value	
4-	Land	(integration)	(Oliver)	- Сергесі		_		
	Land		<del> </del>	<del></del>	<del></del> -		_	
	Buildings		-	<del>                                     </del>	<del></del>		_	
	Leasehold improvements		<del>                                     </del>	<del> </del>				
	Equipment Other		<del> </del>	<del></del>				
	. Add lines 1a through 1e (Column (d) must equ	ual Form 990 Part Y col	umn (B) line 10(c) \	1	<b>•</b>	_		
. <del></del>		uai i Oini 990, Fait A, COI	a (D), inte 10(C) )	<del></del>	Schodule	D /Fa=	- 000	2040

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

Sche	dule D (Form 990) 2010 Fund for the European Univers	ity at 59-378079	<u> </u>	Page <b>4</b>
	rt XI Reconciliation of Change in Net Assets from Form 990 to			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	-	1_	<u>4,</u> 947,277
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	738,545
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	4,208,732
4	Net unrealized gains (losses) on investments		4	241,892
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV )		8	
9	Total adjustments (net) Add lines 4 through 8		9	241,892
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	4,450,624
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements		1	5,189,169
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a 241,892		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	241,892
3	Subtract line 2e from line 1	f I	3	4,947,277
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
5			5	4,947,277
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statem	<u>ents With Expenses per F</u>	<u> </u>	'n
1	Total expenses and losses per audited financial statements		_1_	738,545
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	· · · · · · · · · · · · · · · · ·	2d		
е	Add lines 2a through 2d		2e	720 545
3	Subtract line 2e from line 1	f i	3	738,545
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV )	4b		
C	Add lines 4a and 4h		4c	

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, line 2, 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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIV Supplemental Information

738,545

Part XIV Supplemental Information (continued)

### SCHEDULE F (Form 990)

### Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Fund for the European University at St. Petersburg

**Employer identification number** 59-3780793

General Information on Activities Outside the United States. Complete if the organization answered "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 ☐ Yes ☐ No grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) is (b) Number of (f) Total (a) Region (c) Number of a program service, expenditures for employees, agents, region (by type) (e.g., offices in the and independent fundraising, program describe specific type of and investments region contractors services, investments, service(s) in region in region grants to recipients in region located in the region) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15)(16)(17)3a Sub-total **b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2010 Fund for the European University at 59-3780793 Part II

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶

Part II can	Part II can be duplicated if additional space is needed	additional spa	ice is needed.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(r) Manner of cash disbursement	(g) Amount of non-cash assistance	(n) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
(5)		Russia	Avi Chai grant	000'9	Wire transfer	sfer		
			Ctr for Rule of Law	403,356	Wire transfer	sfer		
(2)		Russia						
	1		General programs	297,131	Wire transfer	sfer		
(3)		Russia						
(4)								
(5)								
(9)								
(7)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2010

for Form 5713)

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2010

### Part V Supplemental Information

Complete this part to provide the information required in Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

The Board of Directors meets twice a year at the European University at St.

Petersburg, 3 Gagarinskaia Street, St. Petersburg, Russia, and hears

detailed reports from the University's Rector and Finance Director

concerning the use of the grants allocated by the Fund of the University.

In addition, the Rector of the European University sits as a member of the

Fund's Board of Directors and communicates regularly to the Board

concerning the use of the Fund's grants. Four other members of the Fund's

seven member Board of Directors (Professors Balzer, Lapidus, McAuley, and

Rosenberg) also sit on the European University's Board of Trustees and

attend its meetings in June and December.

**SCHEDULE O** 

(Form 990 or 990-EZ)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public
Inspection

OMB No 1545-0047

Internal Revenue Service
Name of the organization

Fund for the European University at St. Petersburg

Employer identification number 59–3780793

Form 990, Part III, Line 4d - All Other Achievements Grant of \$6,000 to the European University at St. Petersburg for UM-EU televideo courses.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A DRAFT COPY OF FORM 990 IS REVEIWED BY THE BOARD PRESIDENT BEFORE BEING FILED.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The Board requires statements twice a year at its Board meeting from directors reviewing their activities and affirming adherence to the Fund's policy.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation The organization makes all of its governing documents available to the public by request.