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990 Form

#### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung

OMB No 1545-0047

2010

Department of the Treasury

benefit trust or private foundation)

Open to Public Inspection

Inter	nal Reve	nue Service	► The organization may have to use a copy of this return to satisfy state rep	orting requirements	Inspection
Α	For th	e 2010 calend	dar year, or tax year beginning 07-01 , 2010, and e		6-30 ,20 11
В	Cneck if	applicable	C Name of organization New Jersey City University Foundation, In	С	D Employer identification no
	Address	change	Doing Business As		23-7261698
	Name ch	nange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E. Telephone number
	Inival ret	urn	2039 Kennedy Blvd	<u> </u>	(201)200-3035
	Terminat	ted	City or town state or country and ZIP • 4		1,273,736
	Amende	d return	Jersey City, NJ 07305		G Gross receipts \$
	Applicati	on pending	F Name and address of principal officer William Fellenberg		
			2039 Kennedy Blvd, Jersey City, NJ 07305	H(a) Is this a group re affiliates?	lum for Yes X No
1	Tax-exer	mpt status X	501(c)(3) 501(c) ( ) ◀ (msert no.) 4947(a)(1) or 527	H(b) Are all athirates in	ncluded? Yes No
J	Website	▶ njc	u edu	H(c) Group exemption	ist (see instructions) number
к	Form of	organization X	Corporation Trust Association Other L Year of formation 1	971 M State of legs	al domicile NJ
Pa	rt I	Summan			
	1		be the organization's mission or most significant activities THE MISSION OF T		
		FOUNDATIO	ON, INC. (THE "FOUNDATION") IS TO ENCOURAGE AND SUPPORT T	HE DEVELOPMENT	AND THE
ĉ d	;		F NEW JERSEY CITY UNIVERSITY (THE "UNIVERSITY") BY MEANS	OF DEVELOPMEN	T AND
, A			ING ACTIVITIES.		
V e	2	Check this be	, , , , , , , , , , , , , , , , , , , ,		,
t n	3		oting members of the governing body (Part VI line 1a)	3	13
e 1	4		dependent voting members of the governing body (Part VI line 1b)		11
S c	5		r of individuals employed in calendar year 2010 (Part V, line 2a)	5	0
8	6		r of volunteers (estimate if necessary) · · · · · · · · · · · · · · · · · · ·	6	11
	7a		ed business revenue from Part VIII, column (C), line 12 · · · · · · · · · · · · · · · · · ·	· · · · · · · 7a	0
_	b	Net unrelated	d business taxable income from Form 990-T, line 34 · · · · · · · · · · · · · · · · · ·	· · · · · · 7b	0
2012				Prior Year	Current Year
$\sim$ e	8		and grants (Part VIII, line 1h)	827,127	<del></del>
۳۵ <mark>,</mark>	9	-	rice revenue (Part VIII line 2g)	162,830	<del></del>
<u>ي</u> _	10		ncome (Part VIII, column (A) lines 3.4 and 7d)	151,067	<del></del>
Œ.	11		e (Part VIII, column (A) lines 5, 6d 8c 9c 10c and 1/1e)	71,365	<del> </del>
NED MAR	12		e - add lines 8 through 11 (must equal Pair VIII column (A) line (2)	1,212,389	<del></del>
	13	Grants and si	imilar amounts paid (Part IX column (A) Lines 13) 6 7012	305,835	504,079
E	14	Benefits paid	to or for members (Part IX column (A) Tihe 4) 1.6 2012	202 757	710 400
≨×	15		er compensation employee benefits (Part IX column (A) lines 5,10)	302,757	318,426
Z P	4		fundraising fees (Part IX, column (A), line 11e).		 
<b>3</b> s	i		es (Part IX, column (A), lines 11a-11d 11f-24f)	457,603	395,578
ን e s	17		es Add lines 13-17 (must equal Part IX, column (A), line 25)	1,066,195	
	18		expenses Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · ·	146,194	
	<del>  ''</del> -	- Treveride less	sexpenses Subtract line 10 normine 12		,
Net Asset	s   20	Total assets (	Part X line 16) · · · · · · · · · · · · · · · · · · ·	7,454,684	End of Year 8 , 111 , 389
or Fund	21		s (Part X line 26)	451,211	400,909
Ba⊩	22		fund balances Subtract line 21 from line 20 · · · · · · · · · · ·	7,003,473	7,710,480
Pa	4	Signatur			<u> </u>
			ire that I have examined this return including accompanying schedules and statements, and to the best of my k	лоwledge	
and be	elief it is	true correct/and o	complete Declaration of prepare wother than officer) is based on all information of which preparer has any know	dedge	<del></del>
	-		a tolkeland	' <b>2</b> ,	lolis
Sign	n	Signature	of officer	Date	
Her	- 1	Willi	am Fellenberg, Interim Executive Director		
,,,,,	· ,	Type or pr	rini hame and title		
		Print/Type prep		Check if P	TIN
Paid	i	Barbara	E Hunt Sugar total 2/8/12		P00916443
	- parer		KPMG LLP/ St. Tax Margen	Firm's EIN 13-5	365207
	Only	J	▶ 345 Park Avenue	Phone no 212-75	8-9700
	,		New York NY 10154-0102		
May	the IRS	discuss this i	return with the preparer shown above? (see instructions) · · · · · · · · · · · · · · · · · · ·		· · · X Yes No
For	aperw	vork Reductio	n Act Notice, see the separate instructions	EEA	Form <b>990</b> (2010)

	m 990 (2010) New Jersey City University Foundation, Inc	23-7261698	Page 2
Pa	Int III Statement of Program Service Accomplishments		<del></del>
	Check if Schedule O contains a response to any question in this Part III		<u> </u>
1	Briefly describe the organization's mission		
	THE MISSION OF THE NEW JERSEY CITY UNIVERSITY FOUNDATION, INC (THE "FOUNDATION		
	ENCOURAGE AND SUPPORT THE DEVELOPMENT AND THE GROWTH OF NEW JERSEY CITY UNIVER	SITY (THE	
	"UNIVERSITY") BY MEANS OF DEVELOPMENT AND FUNDRAISING ACTIVITIES		
_			
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		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		
		· · · · Yes X	No
4	If "Yes," describe these changes on Schedule O  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		
	allocations to others, the total expenses, and revenue, if any, for each program service reported	and	
4a	(Code ) (Expenses \$ 504,079 including grants of \$ 504,079 ) (Revenue		<del></del>
40	THE FOUNDATION PROVIDED FUNDING TO NEW JERSEY CITY UNIVERSITY FOR STUDENT SCHO	· .	)
	OTHER PROGRAMMATIC PURPOSES	DAKSHIES AND	
	VIIIIN TROOKSIINITE TORTOODS		
4b	(Code ) (Expenses \$ 240,407 including grants of \$ ) (Revenue	\$ 152,8	40)
	THE BUSINESS DEVELOPMENT INCUBATOR (BDI) AT NJCU FOUNDATION IS CONSISTENT WITH	THE MISSION	OF
	THE UNIVERSITY, WHICH INCLUDES A COMMITMENT TO THE IMPROVEMENT OF THE EDUCATION	NAL, CULTURAL	,
	SOCIOECONOMIC AND PHYSICAL ENVIRONMENT OF THE SURROUNDING UNBAN REGION THE BD	I IS AN	
	INTEGRAL PART OF THE SMART GROWTH REDEVELOPMENT PLAN FOR JERSEY CITY WESTSIDE	AND IS LOCATED	)
	IN A DESIGNATED NJ URBAN ENTERPRISE ZONE. BDI FACILITATES THE FORMATION AND DE	VELOPMENT OF	
	ENTREPRENEURIAL VENTURES HELPING THEM SURVIVE AND GROW DURING THEIR CRITICAL ST	TART-UP PERIO	).
	BDI ASSISTS THE COMPANIES TO COMMERCIALIZE THEIR PRODUCTS BY PROVIDING PRIVATE	OFFICE SPACE	
	AND BY SHARING OFFICE RESOURCES AND ENABLING ACCESS TO FINANCIAL, LEGAL, MARKEY	ring and	
	MANAGEMENT ASSISTANCE BDI'S GOAL IS TO HELP BUSINESSES LAUNCH FROM THE BDI AS	HEALTHY VIABI	Œ
	COMPANIES WHICH WILL CREATE JOBS AND IMPROVE THE CITY'S ECONOMIC PRESENCE IN THE	ie metropolit <i>i</i>	7N
	AREA.		
4c	(Code ) (Expenses \$ 49,644 including grants of \$ ) (Revenue	\$	)
	THE FOUNDATION, IN COLLABORATION WITH THE UNIVERSITY, IS PURSUING A PLAN TO REM		
	DEVELOP 21-ACRES OF LAND PURCHASED BY THE UNIVERSITY WHICH IS LOCATED ON THE WE	ST SIDE OF	
	JERSEY CITY THIS PROJECT IS KNOWN AS THE WEST CAMPUS REDEVELOPMENT PLAN		
		<del></del>	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$ ) (Revenue \$	}	
4e	Total program service expenses ▶ 794,130		

Form 990 (2010) New Jersey City University Foundation, Inc

EFA

Pa	rt IV   Checklist of Required Schedules		·	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A · · · · · · · · · · · · · · · · · ·		1	i i
2	Is the organization required to complete Schedule B Schedule of Contributors? (see instructions)		X	<del></del>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	X	├
Ů	candidates for public office? If "Yes," complete Schedule C, Part I	  -: 3	l	
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		lv
5	Is the organization a section 501(c)(4) 501(c)(5) or 501(c)(6) organization that receives membership dues assessments	r	<u> </u>	<u> </u>
-	or similar amounts as defined in Revenue Procedure 98-19? If 'Yes complete Schedule C Part III	5	•	•
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			<del> </del>
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes "	;		!
	complete Schedule D. Part I	6	į l	<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space			<del>- 1</del> -
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures or other similar assets? If "Yes "	-		
	complete Schedule D Part III · · · · · · · · · · · · · · · · ·	8	х	
9	Did the organization report an amount in Part X. line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management credit repair, or debt negotiation services? If "Yes "	!		!
	complete Schedule D, Part IV · · · · · · · · · · · · · · · · · ·	9	1	Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D. Part V • • • • • • • • • • • • • • • • • •	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		ĺ	
а	Did the organization report an amount for land buildings and equipment in Part X line 10? If "Yes ' complete	į i	j	
	Schedule D Part VI · · · · · · · · · · · · · · · · · ·	' 11a j	Χ	
b	Did the organization report an amount for investments - other securities in Part X. line 12 that is 5% or more		J.	
	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	, 1 ;	1	
	of its total assets reported in Part X. line 16? If "Yes," complete Schedule D. Part VIII	11c		<u>X</u>
đ	Did the organization report an amount for other assets in Part X. line 15 that is 5% or more of its total assets		ļ	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
	Did the organization report an amount for other liabilities in Part X. line 25? If "Yes," complete Schedule D. Part X.	11e		<u>X</u>
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		<u>X</u>
12a	Did the organization obtain separate independent audited financial statements for the tax year? If "Yes " complete	10-	i	
	Schedule D Parts XI XII, and XIII · · · · · · · · · · · · · · · · ·	12a	<u> X</u>	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes " and if	405	}	.,
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		- <u>X</u> -
13	To the digamization of solidar accounts the control of the complete control of the control of th	13 14a		<u>X</u> .
14a	Did the organization maintain an office employees or agents outside of the United States?	144	<del></del> -	<u>X</u> _
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising business, and program service activities outside the United States? If "Yes," complete Schedule F. Parts I and IV	14b	i	v
4.5	Did the organization report on Part IX column (A) line 3 more than \$5 000 of grants or assistance to any	140		<u>X</u>
15	organization or entity located outside the United States? If 'Yes' complete Schedule F. Parts II and IV · · · · · · · · · ·	15 ,		v
46	Did the organization report on Part IX column (A), line 3 more than \$5,000 of aggregate grants or assistance			<u>X</u>
16	to individuals located outside the United States? If "Yes" complete Schedule F. Parts III and IV · · · · · · · · · · · · · · · · · ·	16	ŀ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
17	on Part IX column (A) lines 6 and 11e? If "Yes " complete Schedule G Part I (see instructions)	17	i	Y
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-:	Г	. <u>X</u> .
10	Part VIII lines 1c and 8a? If "Yes " complete Schedule G Part II · · · · · · · · · · · · · · · · · ·	18	х	
19	Did the organization report more than \$15 000 of gross income from gaming activities on Part VIII line 9a?			
. 3	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19 ;	!	Х
20a	Did the organization operate one or more hospitals? If "Yes " complete Schedule H	20a		$\frac{\dot{X}}{X}$
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note Some			
-	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	!	
		Form 9	90 (20	)10)

Pa	irt IV Checklist of Required Schedules (continued)			
		,	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	1		
	in the United States on Part IX, column (A) line 19 If "Yes," complete Schedule I Parts I and II - · · · · · · · · · · · · · · · · ·	21	Х	;
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the		<del></del> -	<u> </u>
	United States on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III	22	, ,	Х
23	Did the organization answer "Yes" to Part VII, Section A. line 3.4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1 !	: '	
	employees? If "Yes " complete Schedule J	23	х	ĺ
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	<del></del>		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1 1		
	24b through 24d and complete Schedule K if "No " go to line 25	24a	í	i X
р	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes " complete Schedule L, Part I	25a	!	_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	H ===+		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	<u>.</u> 1	1	
	990-EZ? If "Yes " complete Schedule L, Part I · · · · · · · · · · · · · · · · · ·	25b	j	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	200		
_	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.			_^_
	substantial contributor or a grant selection committee member, or to a person related to such an individual?			
	If "Yes " complete Schedule L, Part III · · · · · · · · · · · · · · · · ·	27	1	v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L	<del>- '</del> -	-+	<u>X</u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		- 1	
а	A current or former officer, director trustee or key employee? If "Yes," complete Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28a		Х
b	A family member of a current or former officer director, trustee or key employee? If "Yes," complete		<u></u> +	
-	Schedule L Part IV · · · · · · · · · · · · · · · · · ·	28b	i	Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			∆
ŭ	was an officer director trustee or direct or indirect owner? If "Yes" complete Schedule L, Part IV	28c	i	v
29	Did the organization receive more than \$25 000 in non-cash contributions? If 'Yes' complete Schedule M · · · · · · · · · ·	29	, L	Χ
30	Did the organization receive contributions of art historical treasures or other similar assets or qualified			
50	conservation contributions? If "Yes " complete Schedule M · · · · · · · · · · · · · · · · · ·	30	х	
31	Did the organization liquidate terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		<del>^</del>	
٠.	Part I · · · · · · · · · · · · · · · · · ·	31		v
32	Did the organization sell exchange dispose of or transfer more than 25% of its net assets? If "Yes ' complete		-  -	Ϋ́
72	Schedule N, Part II	32	i	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	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			
34	III, IV, and V line 1 · · · · · · · · · · · · · · · · · ·	34	:	v
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		$\frac{X}{X}$
	Did the organization receive any payment from or engage in any transaction with a	-33		
а	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R	1	İ	
		,		
26	Part V line 2 · · · · · · · · Yes X No Section 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related	1	1	
36	organization? If "Yes" complete Schedule R, Part V line 2 · · · · · · · · · · · · · · · · · ·	26		v
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_36		<u>^</u>
37	·	1 1	•	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R  Part VI			.,
3.0		37		<u>X</u>
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			
	EEA	Form 9	au (20	10)

#### Part V

			T	·:
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ď	Yes	No
b	——————————————————————————————————————	. d	İ	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-}		
	gaming (gambling) winnings to prize winners?	. 1 <sub>c</sub>	X	
2a	Enter the number of employees reported on Form W-3 Transmittal of Wage and Tax	1	Ť 🏠	Ť
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	ď		
b	If at least one is reported on line 2a did the organization file all required federal employment tax returns?	.   2b		
	Note. If the sum of lines 1a and 2a is greater than 250 you may be required to e-file (see instructions)		<del>                                     </del>	†—
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a	1	L X
b	If "Yes" has it filed a Form 990-T for this year? If "No" provide an explanation in Schedule O · · · · · · · · · · · · · · · · · ·	· 3b		
4a	At any time during the calendar year did the organization have an interest in, or a signature or other authority		!	1
	over a financial account in a foreign country (such as a bank account, securities account or other financial	i	!	1
	account)?	• <u>4a</u>	<u> </u>	<u> </u>
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	• <u>5</u> a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	·5b	<u> </u>	X
С	If "Yes" to line 5a or 5b did the organization file Form 8886-T?	· 5c	1	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ì	1	,
	organization solicit any contributions that were not tax deductible?	•6a		Ϋ́
b	If "Yes " did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	1	; ;	
-		6b	ļi	
7	Organizations that may receive deductible contributions under section 170(c)  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	X	
c	Did the organization sell-exchange, or otherwise dispose of tangible personal property for which it was	. 70	X	
·	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	. † 7c		v
ď	If "Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · ·	1	<del>i                                    </del>	<u>X</u> .
e	Did the organization receive any funds, directly or indirectly to pay premiums on a personal benefit contract?	.i ·		Y
f	Did the organization, during the year, pay premiums, directly or indirectly on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f	j j	<u>X</u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars boats airplanes and other vehicles did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization or a donor advised fund maintained by a sponsoring	1		
	organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor donor advisor or related person?	9b		
0	Section 501(c)(7) organizations Enter		- 1	
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·	! -		
b	Gross receipts, included on Form 990, Part VIII line 12, for public use of club facilities · · · · · · · · 10b	-		
1	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·	!		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	i l	1	
	amounts due or received from them ) · · · · · · · · · · · · · · · · · ·			
2a	Section 4947(a)(1) non-exempt charitable trusts Is the organization filing Form 990 in lieu of Form 10412 · · · · · · · · · · · · · · · · · · ·	12a		
b	If "Yes" enter the amount of tax-exempt interest received or accrued during the year · · · · · · · · 12b]	-		
3	Section 501(c)(29) qualified nonprofit health insurance issuers	1	-+	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O	i		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	.	\$	
_	Enter the amount of reserves on hand	{		
c 4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes' has it filed a Form 720 to report these payments? If "No ' provide an explanation in Schedule O	14b		
	FEA		90 (20	10)

Forn	1990 (2010) New Jersey City University Foundation, Inc. 23-726	1698		Page (
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below and		_	
	for a "No" response to line 8a, 8b or 10b below describe the circumstances processes or changes in			
	Schedule O See instructions			
	Check if Schedule O contains a response to any question in this Part VI	· · · ·	• • •	. X
Sec	tion A. Governing Body and Management		<del>-</del>	
4			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year · · · · · · · · · · · · · · · · · · ·			}
b	Enter the number of voting members included in line 1a above who are independent	$\dashv$		
2	any other officer director trustee, or key employee?	_		İ
3	Did the organization delegate control over management duties customarily performed by or under the direct	·   _2 -	<u>  X</u>	ļ
3	supervision of officers, directors or trustees or key employees to a management company or other person?	. 3	1	İ
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4	<del> </del>	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	. 5	<del> </del>	<del>  X</del>
6	Does the organization have members or stockholders?	. 6	4	X
7a	Does the organization have members stockholders or other persons who may elect one or more members		:	X
-	of the governing body? · · · · · · · · · · · · · · · · · · ·	. 7a	•	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	. 7b	X	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1,0	<del> </del>	
	the year by the following	ļ	ļ	
а	The governing body? • • • • • • • • • • • • • • • • • • •	- 8a	Х	
b	Each committee with authority to act on behalf of the governing body?	- 8b	$\frac{\lambda}{X}$	
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	i i	Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			Δ.
			Yes	No
I0a	Does the organization have local chapters branches or affiliates?	· 10a	100	X
ь	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?	∙ 10Ь		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	1		
	form?	· : 11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No " go to line 13	· 12a	χ	
b	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	
3	Does the organization have a written whistleblower policy?	13		
4	Does the organization have a written document retention and destruction policy?	14	X	
5	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?	1 1	- 1	
а	The organization's CEO Executive Director or top management official		į	<u>X</u>
b	Other officers or key employees of the organization	15b		X
	If "Yes' to line 15a or 15b describe the process in Schedule O (See instructions )			
6a	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		Χ
b	If "Yes " has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1 1		
	the organization's exempt status with respect to such arrangements?	16b	i	
Sect	ion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed NJ			
8	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			
9	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			
0	State the name physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Aaron Aska (201)200~3035			

2039 Kennedy Blvd Jersey City, NJ 07305

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roim	990	(201	u

New Jersey City University Foundation, Inc

23-7261698

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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 organization nor any related organizations compensated any current officer director, or trustee

(A)	(B)	ļ		(	C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	l t d n r i d u r i s e v t c i e t	I t t e	O f c e	All the y e m p l o y e e	H c e c mph p l e e c c s n y t s e t e d	F or m e	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Aaron Aska										
Director	2 00	Х				<u>L</u>			 	 
(2) Carlos Hernandez PhD		1	1							
Director	2 00	X		Ĺ_						
(3) Carol M Preisinger	1	!			į					
Treasurer	1 00	<u>X</u>		Χ		i !				
(4) Dennis Foley	i I	!								
Director	1.00	_X_					Li	·		
(5) Dominick D'Agosta										
Chair	1 00	X	1	Χ		1	i		i	
(6) Khatmeh Osseiran-Hanna										
Executive Director Ended April 2011	10 00	Х		X					i	
(7) Luke Visconti				_			$\Box$			
Director	1 00	X								
(8) Michael J Herbert Esq			i T							
Secretary	1 00	Χ		Х						
(9) Robert I Unanue				_			Ţ			
Director	1 00	Χ		}			!	_	!	
(10)Robert P Haney Jr Esq										· · · · · · · -
Director	1 00	Х		i		} }	ì	ì	•	
(11)Rosemary McGee DMH				Ī						
Vice Chair	1.00	Χ		X	i			)		
(12)Sang Jin Kim PhD				$\neg$						
Director	1 00	Х	ĺ	1	! 		j	į	į	
(13)Thomas J Stanton III	,	;		 !	,				1	
Director	1 00	X	ij	•		i	ļ	1	Į.	
(14)William Fellenberg			h	4.		 !	t- 1	,		
Interim Executive Director	10 00	X	ŀ	Xi	:	i	,		;	
(15)	<u>-</u>			1			!	1	1	
(16)			-+		_		<del> </del> -			
					i		<u>i</u>			

Part VII Section A Officers, Directors, Trustees,	, Key Emplo	yees,	and	d Hi	ghe	st Cor	npe	nsated Employee	s (continued)			
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	Posi I t d n r : d u r i s e v t c r e t d e o u r	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Office	alith Keyemp	H c e l o m g mp h p l e e o s n y t s e l e d	F o r m	(D)  Reportable compensation from the organization (W-2/1099-MISC)	Reportable Compensation from related organization (W-2/1099-MIS	s	ame comp fro orga and	(F) implied ount of othe, pensation om the imization related inizations
(17)				!	.— - !	) ;				1 1	•	-
(18)					;   	<del> </del>			   	+		
(19)				<del> </del>	-							
(20)			<del> </del> 	 	 	 		· · · · · · · · · · · · · · · · · · ·		<del></del> -		
(21)	<u> </u>					 					•	
(22)												
(23)								<u> </u>	<del></del>			
(24)							-					
(25)									· · · · · · · · · · · · · · · · ·	<u> </u>		<b>-</b>
		_ <del></del>								<u> </u>		
(26)	1	_						) 		1		
(27)	l ;	!	,	í	!	! !	1	i		1		
(28)			j		į			}				
to tal from continuation sheets to Part VII, Section of Total (add lines 1b and 1c)		above	  e) w	ho r	ecer	· · · I	ore t	Q han \$100 000 in		0	· 	
					L ls						Ye	es No
Did the organization list any former officer, director or the employee on line 1a? If "Yes " complete Schedule J for the sum of report the organization and related organizations greater than undividual	r such individ able comper S150,000?	dual nsation	n an s," c	d ot	her d	compe Sched	nsal Iule	non from  J for such			4	X
5 Did any person listed on line 1a receive or accrue comp for services rendered to the organization? If "Yes " con"							atio	n or individual		. !	5 }	× l
Section B. Independent Contractors  Complete this table for your five highest compensated is compensation from the organization	independent	contr	acto	rs th	at re	eceive	d mo	ore than \$100 000	of			
(A) Name and business address								(8) Description of sen	vices	Co	(C) ompensa	fron
Total number of independent contractors (including but more than \$100 000 in compensation from the organiza		o thos	e lis	ted	abov	ve) wh	o rec	ceived				

Part	VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function ravenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 513 or 514
Contn- butions gifts grants and other similar	d Related organizations · · · · · · · 1d e Government grants (contributions) · · 1e 15 f All other contributions gifts grants	, 168 , 591			
amounts	· ·	, 668			
Program Service Revenue	C		152,840		
	e f All other program service revenue · · · · ·				
	g Total Add lines 2a-2f	152,840			4
	Investment income (including dividends interest and other similar amounts)     Income from investment of tax-exempt bond proceeds     Royalties	· · ▶	i 		129,443
	6a Gross Rents	onal			
O t	7a Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses · · · · 60,101  c Gain or (loss) · · · · · · 1,743				
h e r R e v e n	b Less direct expenses · · · · · b 151	5,515 .,970			1,743
u e	c Net income or (loss) from fundraising events				3,545
 	10a Gross sales of inventory, less returns and allowances · · · · · · a b Less cost of goods sold · · · · · b c Net income or (loss) from sales of inventory · · · · · ·	<del></del>			1
	Miscellaneous Revenue Business Co	de			
!	e Total Add lines 11a-11d	1,061,665	152,840	- 0	
	ÉE A				Form 990 (2010)

#### 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)

D	All other organizations must complete column o not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	o, 8b, 9b, and 10b of Part VIII	ruiai expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV. line 21 · · · · ·	504,079	504,079		
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	1			
	U.S. See Part IV lines 15 and 16 · · · · · · · ·				
4	Benefits paid to or for members · · · · · · · · ·				
5	Compensation of current officers directors				
	trustees, and key employees	· · · · · · · · · · · · · · · · · · ·			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	]	,		
	persons described in section 4958(c)(3)(B) · · · · · ·				
7	Other salaries and wages	238,899	82,216		156,683
8	Pension plan contributions (include section 401(k)	ļ	ļ	ŀ	
	and section 403(b) employer contributions) · · · · ·		<del></del>		
9	Other employee benefits	79,527	28,899		50,628
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·				~
11	Fees for services (non-employees)	j			
а	Management · · · · · · · · · · · · · · · · · · ·	144,624	65,199	·	79,425
b	Legal·····	38,439	36,829	1,610	
С	Accounting · · · · · · · · · · · · · · · · · · ·	22,840	· · · · · · · · · · · · · · · · · · ·	22,840	
ď	Lobbying · · · · · · · · · · · · · · · · · · ·		·	- ,	
е	Professional fundraising services. See Part IV. line 17 ·				
f	Investment management fees · · · · · · · · · · · ·	18,337	···	18,337	
g	Other · · · · · · · · · · · · · · · · · · ·			·	
12	Advertising and promotion	5,000	5,000		
13	Office expenses	19,684	3,409	6,417	9,858
14	Information technology · · · · · · · · · · · · · · · · · · ·	6,150		6,150	
15	Royalties				
16	Occupancy · · · · · · · · · · · · · · · · · · ·	50,288	50,288	·	
17	Travel	7,026	15	4,754	2,257
18	Payments of travel or entertainment expenses		4		
	for any federal state or local public officials		<u>-</u> <del>-</del> <del>-</del> <del>-</del> <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> - <del>-</del> <del>-</del> - <del>-</del> <del>-</del>		
19	Conferences, conventions and meetings · · · · · · !	2,807	1,274	1,108	425
20	Interest · · · · · · · · · · · · · · · · · · ·			<u> </u>	<del></del>
21	Payments to affiliates · · · · · · · · · · · · · ·				
22	Depreciation depletion and amortization · · · · · ·	3,658		3,658	
23	Insurance · · · · · · · · · · · · · · · · · · ·	12,318	7,037	5,281	
24	Other expenses litemize expenses not covered	İ			
	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25 column	1		!	
	(A) amount list line 24f expenses on Schedule O)				
а	MISCELLANEOUS EXPENSES	9,602	4,893	999	3,710
b	MEMBERSHIP EXPENSES	4,150	2,650	1,500	11 000
С	OFFICIAL RECEPTION	50,655	2,342 i	37,080	11,233
d		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
е		<u> </u>			
f	All other expenses	1 2 2 2 2 2 2			
25	Total functional expenses. Add lines 1 through 24f · ·	1,218,083	794,130	109,734	314,219
26	Joint Costs Check here ▶ if following SOP 98-2 (ASC 958-720) Complete this line		!	1	
	only if the organization reported in column	<u> </u>	į	i I	
	(B) joint costs from a combined educational	İ		i	
	campaign and fundraising solicitation		<u> </u>	l	

FFA

<u>Part</u>	<u>X  </u>	Balance Sheet	(6)	<del></del>	/D)
		,	(A) Beginning of year	I !	(B)
		Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·		++	End of year
	1		274,194	11!	220,788
-	2	Savings and temporary cash investments	526,690	<u>  2</u>	176,740
	3	Pledges and grants receivable, net	1,681,322	3	1,694,020
	4	Accounts receivable net	33,466	4	146,66
	5	Receivables from current and former officers directors, trustees, key			
- 1		employees, and highest compensated employees. Complete Part II of		_	
	_	Schedule L · · · · · · · · · · · · · · · · · ·		5	
	6	Receivables from other disqualified persons (as defined under section			
A ;		4958(f)(1)) persons described in section 4958(c)(3)(B), and contributing		1	
s		employers and sponsoring organizations of section 501(c)(9) voluntary			
s e		employees' beneficiary organizations (see instructions)		6	
t	7	Notes and loans receivable net		7	
s	8	Inventories for sale or use		8	
ļ	9	Prepaid expenses and deferred charges	29,678	9	7,11
	10a	Land buildings and equipment cost or		!!	
		other basis Complete Part VI of Schedule D · · · · 10a 45,013			
	b	Less accumulated depreciation · · · · · · · · · 10b 22,593	6,450	10c	22,420
	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·	4,843 458	11	5,749,17
	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 · · · · · · · · · · · · · · · · · ·	59,426	15	94,46
i	16	Total assets. Add lines 1 through 15 (must equal line 34) · · · · · · · · ·	7,454,684	16	8,111,389
	17	Accounts payable and accrued expenses	451,211	17	400,909
(	18	Grants payable • • • • • • • • • • • • • • • • • • •		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities · · · · · · · · · · · · · · · · · · ·		20	
a	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors trustees, key			
		employees highest compensated employees and disqualified			
; 		persons Complete Part II of Schedule L		22	
·	23	Secured mortgages and notes payable to unrelated third parties		23	
е	24	Unsecured notes and loans payable to unrelated third parties	·	24	
S i	25	Other liabilities Complete Part X of Schedule D · · · · · · · · · · · · · · · · · ·		25	
1	26	Total liabilities Add lines 17 through 25	451,211	26	400,909
-		Organizations that follow SFAS 117, check here▶ X and	· · · · · · · · · · · · · · · · · · ·		<del></del>
F		complete lines 27 through 29, and lines 33 and 34			
u	27	Unrestricted net assets	1,141,887	27	963,595
n d	28	Temporarily restricted net assets	3,636,369	28	4,414,284
	29	Permanently restricted net assets · · · · · · · · · · · · · · · · · · ·	2,225,217	29	2,332,601
В		Organizations that do not follow SFAS 117, check here ▶	<u> </u>		<del> </del>
a		and complete lines 30 through 34	i		
a	30	Capital stock or trust principal or current funds		30	
" !	30	Paid-in or capital surplus or land building, or equipment fund		31	
ام	31	Retained earnings, endowment, accumulated income or other funds		32	
s !	32	Total net assets or fund balances · · · · · · · · · · · · · · · · · · ·	7,003,473	33	7,710,480
- 1	33		7,454,684	34	8,111,389
	34	Total liabilities and net assets/fund balances	7,434,004	34	Form 990 (2010

Form 99	) (2010) New Jersey City University Foundation, Inc. 23	-7261698		Pa	age 12
Part )	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI		···	• •	· x
	al revenue (must equal Part VIII, column (A), line 12)	1	1,06	51,6	65
2 To	at expenses (mest equal - art ix, eastim to y, into acy	2	1,21	18,0	83
	Total loss expenses obstact the Entertaine	3	(1	56,4	418)
4 Ne	t assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,00	3,4	73
5 Ot	ner changes in net assets or fund balances (explain in Schedule O)	5	86	53,4	25
6 Ne	t assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
co	umn (B))	6	7,71	10,4	80
Part >	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				· x
				Yes	No
1 Ac	counting method used to prepare the Form 990 Cash X Accrual Other	İ		1	
if t	ne organization changed its method of accounting from a prior year or checked "Other" explain in			1	
	nedule O		ļ	- 1	
	re the organization's financial statements compiled or reviewed by an independent accountant?	ļ	2a		X
b W	re the organization's financial statements audited by an independent accountant?	• • • • • _	2b	X	
-	Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1	- 1	
the	audit, review, or compilation of its financial statements and selection of an independent accountant? $\cdots \cdots$		2c	X	
If t	ne organization changed either its oversight process or selection process during the tax year, explain in	1	-		
Sc	nedule O		- [	}	
d If"	Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
ISS	ued on a separate basis consolidated basis or both	-			
х	Separate basis Consolidated basis Both consolidated and separate basis				
3a As	a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
the	Single Audit Act and OMB Circular A-133?		3a		Х
	res," did the organization undergo the required audit or audits? If the organization did not undergo the	Ī			
	uired audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

EEA

Form 990 (2010)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

2010

Open to Public Inspection

		e organization	Four	dation Too						er identificatio		
		rsey City Uni					4- Ab	4 \ C		-726169	8	
	art i			ty Status (All organic					structions			
	orga	•		ause it is (For lines 1 th	_		•	,				
1				association of churches		In section	n 170(b)(1	}(A)(i).				
2				(1)(A)(ii). (Attach Sched								
3				ervice organization desc								
4			organization oper	ated in conjunction with	a hospital	described	ın sectio	n 170(b)(1	l)(A)(in) E	inter the ho	ospital's n	ame
		city, and state				<del> </del>						
5				efit of a college or univer	sity owner	d or operate	ed by a go	vernment	al unit des	cribed in		
		section 170(b)(1)(/	4)(IV) (Complete f	Part II )								
6				or governmental unit des								
7	Х	An organization tha	t normally receive:	s a substantial part of its	support f	rom a gove	ernmental	unit or fro	m the gen	eral public		
		described in sectio	n 170(b)(1)(A)(vi)	(Complete Part II)								
8		A community trust of	described in section	on 170(b)(1)(A)(vi). (Cor	nplete Pa	rt II )						
9		An organization tha	t normally receive:	s (1) more than 33 1/3%	of its sup	port from o	contributio	ns, memb	ership fee	s, and gro	ss	
		receipts from activit	ies related to its e	xempt functions - subjec	t to certai	n exception	ns, and (2)	no more	than 33 1/	3% of its		
		support from gross	investment income	e and unrelated busines	s taxable i	ncome (les	ss section	511 tax) f	rom busine	esses		
		acquired by the org	anization after Jun	e 30, 1975 See section	1 509(a)(2	) (Complet	te Part III	)				
10		An organization org	anized and operat	ed exclusively to test for	public sa	fety See s	ection 50	9(a)(4).				
11		An organization org	anized and operat	ed exclusively for the be	nefit of, to	perform th	ne function	is of, or to	carry out	the		
		purposes of one or	more publicly supp	orted organizations des	cribed in s	section 509	9(a)(1) or s	ection 50	9(a)(2) Se	e section		
				es the type of supporting								
		a Type I	_	ell c		I-Functions			ď	Type	III-Other	
е		By checking this bo	x, I certify that the	organization is not contr	olled dire	ctly or indire	ectly by or	ne or more				
		persons other than	foundation manage	ers and other than one o	r more pu	blick supp	orted orga	anizations	described	in section		
		509(a)(1) or section				, <sub>F</sub> F				0000.017		
f				etermination from the IF	RS that it is	s a Type!	Type II o	r Type III s	supporting			
•		organization, check										
g				zation accepted any gift	or contrib	ution from	any of the	2				
9		following persons?	or not incorpor	, g			u., u					
		. • .	directly or indirectly	y controls, either alone o	r together	with nerso	ne deeril	ned in (ii)			Г	<del></del>
			•	y of the supported organ	-	•		• •				Yes No
				cribed in (i) above?							11g(i)	<del>i</del>
		` ,	•	, ,							11g(0)	
		• •		on described in (i) or (ii)		· · · · · ·					11g(iii)	
h			T	t the supported organiza	T	<del></del>	T		Τ		<del>,</del>	
	(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your	(v) Did y the organ		(vi) organizat	is the	1 ' '	mount of pport
		•		above or IRC section	governing		col (i)	of your	(i) organi	zed in the	50	pport
				(see instructions) )		T	<del> </del>	port?	<del> </del>	S ?	1	
					Yes	No	Yes	No	Yes	No	ļ	
A)						ŀ			) !			
					ļ <u>.</u>							
B)							İ					
								<u> </u>		<u></u>		
C)									]			
									}			
D)					!			]	1			
									1			
E)											<del></del>	
					!					į J		

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 )

	tion A. Public Support						
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")	822,130	734,152	909,574	827,127	774,094	4,067,07
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 · · · · ·	822,130	734,152	909,574	827,127	774,094	4,067,077
5	The portion of total contributions by each						
	person (other than a governmental unit or					ļ	
	publicly supported organization) included			i			
	on line 1 that exceeds 2% of the amount			ì			
	shown on line 11 column (f)		į	į	,		322,385
6	Public support Subtract line 5 from In 4						3,744,692
Sec	tion B. Total Support				············		
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4 · · · · · · · ·	822,130	734,152	909,574	827,127	774,094	4,067,077
8	Gross income from interest dividends, payments received on securities loans, rents, royalties and income from similar sources	399,650	298,121	258,912	320,554	282,283	1,559,520
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 ·						5,626,597
12	Gross receipts from related activities, etc. (	see instructions) ·				12	
13	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first,	second, third, fourt	h, or fifth tax year	as a section 501(	:)(3)	
Sec	<u>tion C. Computation of Public Su</u>	pport Percenta	ige				
14	Public support percentage for 2010 (line 6						56 55 %
15	Public support percentage from 2009 Sche				<u></u>		63 62 %
16a	33 1/3% support test - 2010 If the organiz			and line 14 is 33	1/3% or more chi	eck this box	
	and stop here. The organization qualifies a						· · · · ▶ X
b	33 1/3% support test - 2009 If the organiz						
	box and stop here. The organization qualif						•
17a	10%-facts-and-circumstances test - 2010						
	more, and if the organization meets the "fac						
	organization meets the "facts-and-circumst						
b	10%-facts-and-circumstances test - 2009						
	more and if the organization meets the "fac-						
	organization meets the "facts-and-circumst						
18	Private foundation If the organization did	not check a box on	line 13 16a 16b,	17a or 17b check	this box and see	instructions $\cdot \cdot \cdot$	• • • • •

#### 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)

Se	ction A. Public Support						
	endar 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, merchan- dise sold or services performed or faci- lities furnished in any activity that is related to the organization's tax-exempt purpose		!				
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513	<del></del>					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf · · · · · · · · · · · · · · · · · · ·						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	!					
6	Total Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons · · · ·						
b	Amounts included on lines 2 and 3 received 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					1	
8	Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · ·						
Sec	tion B. Total Support						•
	endar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6 · · · · · · · ·						
I0a	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						1
C	Add lines 10a and 10b · · · · · · ·						
1	Net income from unrelated business activities not included in line 10b whether or not the business is regularly carried on						
2	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	]					
3	Total support (Add lines 9 10c 11 and 12) · · · · · · · · · ·				l		
4	First five years If the Form 990 is for the or organization check this box and stop here.	ganization's first	second, third, four	th or fifth tax year	as a section 501(	c)(3)	
	tion C. Computation of Public Sup						
5	Public support percentage for 2010 (line 8, co					15	%
6	Public support percentage from 2009 Schedu				<u></u>	16	%
	tion D. Computation of Investmen						
7	Investment income percentage for 2010 (line					17	%
8	Investment income percentage from 2009 Sc	nedule A Part III,	line 17 · · · ·		• • • • • • • • • •	18	%
9a	33 1/3% support tests - 2010 If the organization of more than 33 1/3%, check this box	ation did not checl and <b>stop here</b> Th	k the box on line 1 ne organization qu	4 and line 15 is n alifies as a publicl	nore than 33 1/3% y supported organi	and line zation	▶
b	33 1/3% support tests - 2009 If the organization 18 is not more than 33 1/3%, check this b						▶
0	Private Foundation. If the organization did n	ot check a box on	line 14 19a, or 1	9b, check this box	and see instruction	ns · · · · ·	▶

#### **SCHEDULE D** (Form 990)

#### **Supplemental Financial Statements**

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

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Name	e of the organization		Employer identification number
<u>Ne</u>	w Jersey City University Foundation,	Inc.	23-7261698
Pa	Organizations Maintaining Donor Advised Funds of the organization answered "Yes" to Form 990, Part IV, line 6	r Other Similar Funds o	r Accounts. Complete if
		r advised funds	(b) Funds and other accounts
1	Total number at end of year · · · · · · · · · · · ·		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the		
_	funds are the organization's property, subject to the organization's exclusive	-	····· Yes N
6	Did the organization inform all grantees donors and donor advisors in writing		
	used only for charitable purposes and not for the benefit of the donor or don	•	
<u> </u>	purpose conferring impermissible private benefit?		
<u>Pa</u>	rt II Conservation Easements. Complete if the organization an Purpose(s) of conservation easements held by the organization (check all the		t IV line /
'	Preservation of land for public use (e.g. recreation or education)		No see estant local asset
	Protection of natural habitat	Preservation of an historica Preservation of a certified h	• •
	Preservation of open space	Freservation of a certified in	istoric structure
2	Complete lines 2a through 2d if the organization held a qualified conservation	on contribution in the form of a	consequation
_	easement on the last day of the tax year	commodion in the form of a t	Son Scr Vallon
	,		Held at the End of the Tax Year
а	Total number of conservation easements		
þ	Total acreage restricted by conservation easements $\cdots \cdots \cdots$		2b
С	Number of conservation easements on a certified historic structure included	ın (a) · · · · · · · · · · · · · · · · · · ·	2c
d	Number of conservation easements included in (c) acquired after 8/17/06 a	and not on a historic	
	structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extingu	ished, or terminated by the orga	anization during
	the tax year		
4	Number of states where property subject to conservation easement is located	ed <b>&gt;</b>	
5	Does the organization have a written policy regarding the periodic monitoring		
	violations and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring inspecting and enforcing c	onservation easements during	the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring inspecting and enforcing conse	rvation easements during the y	rear
	Dage each consequence consequence and transited on line 2(d) above cateful the re	auromosts of soston	
8	Does each conservation easement reported on line 2(d) above satisfy the re 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		· · · · · · · · · Yes No
9	In Part XIV describe how the organization reports conservation easements		
J	balance sheet and include if applicable the text of the footnote to the organ	•	•
	the organization's accounting for conservation easements		
Pai	Organizations Maintaining Collections of Art, Histo Complete if the organization answered "Yes" to Form 990, Part IV.		er Similar Assets.
1a	If the organization elected as permitted under SFAS 116 (ASC 958), not to		and halance sheet works of
	art historical treasures, or other similar assets held for public exhibition, edu	•	
	provide in Part XIV, the text of the footnote to its financial statements that de		
b	If the organization elected as permitted under SFAS 116 (ASC 958) to repo	ort in its revenue statement and	balance sheet works of art
	historical treasures, or other similar assets held for public exhibition, education		
	provide the following amounts relating to these items		·
	(i) Revenues included in Form 990 Part VIII, line 1 · · · · · · · · · · · ·		· · · · · ▶ s
	(ii) Assets included in Form 990 Part X · · · · · · · · · · · · · · · · · ·		
2	If the organization received or held works of art historical treasures, or other		
	following amounts required to be reported under SFAS 116 (ASC 958) relationships (ASC 958) relationshi	ng to these items	
а	Revenues included in Form 990 Part VIII line 1 · · · · · · · · · · · · · · · · · ·		
b	Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·		· · · · · • \$

Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquestion, accession, and other records check any of the following that are a significant use of its collection terms (check all that apply)  a X Public exhibition  b X Scholarly research  c X Preservation for fluring eperations  b X Scholarly research  Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  Practical Provides a description of the organization's collections of air. historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part XIV Scrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990  Part XI Interest or properted an amount on Form 990. Part X, line 21  1a Is the organization an agent, trustec, custodian or other intermetiary for contributions or other assets not included on Form 990. Part X, line 21  b If "Yes," explain the arrangement in Part XIV  C Beginning balance  C Beginning balance  C Beginning balance  C Beginning balance  C Beginning balance  C Beginning balance  D Beginning of year balance  D Beginning of year balance  D Beginning of year balance  OB Contributions  1 Beginning of year balance  OB Contributions  1 C Beginning of year balance  OB Contributions  1 C Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB Contributions  1 S Beginning of year balance  OB		rt III   Organizations Maintaining						ssets (continue	(a)
a X Public exhibition d Land or exchange programs b X Scholarly research e Other  C X Preservation for future generations 4 Provide a description of the organization's olections and explain how they further the organization's exempt purpose in Park XIV 5 During the year did the organization solicit or receive donations of art historical treasures or other similar assests to be solic to raise funds rather than to be maintained as part of the organization's collection? Yes No.    Part IV   Escrow and Custodial Arrangements. Complete in organization answered "Yes" to Form 990   Part IV   Escrow and Custodial Arrangements. Complete in organization answered "Yes" to Form 990   Part IV   Escrow and Custodial Arrangements. Complete in organization answered "Yes" to Form 990   Part IV   Escrow and Custodial Arrangements. Complete in organization answered "Yes" to Form 990   Part IV   Escrow and Custodial Arrangement in Form 990. Part X line 21?   C   Beginning balance	3		, and other recor	ds check any of the fol	llowing that a	are a sigr	nificant use of its		
b X Scholarly research or future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  5 During the year did the organization solicit or receive donations of art instoncial treasures or other similar assets to be sold to crase funds rather than to be maintained as part of the organization's collection? Yes No. Part IV, line 9 or reported an amount on Form 990, Part X, line 9. But I list the organization answered Prefer to Form 990  Fair IV, line 9 or reported an amount on Form 990, Part X, line 21  Is 1s the organization an agent, trustee. Euroband on or other internationally for contributions or other assets not included on Form 990, Part X2. In 1975-7. Explain the arrangement in Part XIV and complete the following lable:  Beginning balance 1 1d									
c. X Preservation for future generations 4 Provide a description of the organization's colections and explain how they further the organization's exempt purpose in Part XIV 5 During the year did the organization solicit or receive donations of art historical treasures or other similar assets to be solic to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990 Part IV. Ine 9 or reported an amount on Form 990, Part X, Ine 21 1a Is the organization an agent, itustec, custodian or other intermediany for contributions or other assets not included on Form 990, Part X?  b If "Yes" explain the arrangement in Part XIV and complete the following table  C Beginning balance  C Beginn	а	· =			rams				
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV	ь	X Scholarly research	е (	Other					
Part XIV   Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990   Part XIV   Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990   Part XIV   Part IV   In e9 or reported an amount on Form 990. Part X   Part IV   Pa	С	-							
So During the year did the organization solicit of receive donations of ant historical treasures or other similar seases to be sold to raise funds rather than to be minilared as part of the organization's collection?   Part IV.	4	Provide a description of the organization's colie	ections and expla	n how they further the	organization	's exemp	t purpose in		
Part IV   Expansion to asset unds rather than to be maintained as part of the organizations collection?   Yes   No									
Part IV   Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990   Part IV. line 9 or reported an amount on Form 990. Part X, line 21   1a is the organization an open firm interestic custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Yes   No.	5	During the year did the organization solicit or r	eceive donations	of art historical treasu	res or other	sımılar			
Pant IV   Ine 9 or reported an amount on Form 990, Part X, line 21   a   Is the regionalization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Yes   No								· · Yes	No
Included on Form 990, Part X?	Par				answered '	'Yes" to F	orm 990		
b   fi*Yes,* explain the arrangement in Part XIV and complete the following table  c   Beginning balance   1c   1c   1c   1c   1c   1c   1c	1a								
C   Beginning balance   1c   C   C		included on Form 990, Part X?					<b>.</b>	· · Yes	No
C   Beginning balance   1c	b	If "Yes," explain the arrangement in Part XIV ar	nd complete the f	ollowing table					
Additions during the year   16							Ar	nount	
E   Distributions during the year   F   Ending balance   11   11   11   12   13   14   15   14   15   15   15   15   15		Beginning balance				· · 1c			
f   Ending balance   11   12   2a   Dot the organization include an amount on Form 990 Part X line 21?   Yes   No   If "Yes" explain the arrangement in Part XIV	d	Additions during the year				· · 1d			
2a Did the organization include an amount on Form 990. Part X. line 21?	е	Distributions during the year				· · 1e			
Part V   Endowment Funds, Complete of the organization answered "Yes" to Form 990 Part IV line 10	f	Ending balance · · · · · · · · · · · · · · · · · · ·				· · 1f			
Part V   Endowment Funds, Complete of the organization answered "Yes" to Form 990 Part IV line 10	2a	Did the organization include an amount on Forr	n 990 Part X lin	e 21?				· · Yes	No
1	b								
1	Par	t V Endowment Funds, Complete	if the organizatio	n answered "Yes" to Fo	orm 990 Pai	rt IV line	10		
b Contributions				-	1			(e) Four years ba	ıck
b Contributions	1a	Beginning of year balance	6,219,40	5,091,434	5,44	13,709	· · · · · · · · · · · · · · · · · · ·		
d Grants or scholarships 528,284 270,947 408,673 e Other expenditures for facilities and programs 152,470 27,090 46,340  f Administrative expenses 9 End of year balance 7,163,260 6,219,401 5,091,434  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment 5.81 % b Permanent endowment 32.56 % c Term endowment 1 61.63 %  3a Are there endowment 1 of 1.63 %  3a Are there endowment 1 on the possession of the organization that are held and administered for the organization by (i) unrelated organizations 3a(ii) X (ii) related organizations 3a(ii) X  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  2 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990 Part X line 10  Describe or investment (a) Cost or other basis (b) Cost or other depreciation  1a Land (iii) Book value (iii) Book value (iii) Book value (iii) Book value (iii) Book value (iii) Buildings (iii) Book value (iii) Buildings (iii) Book value (iii) Book value (iii) Buildings (iii) Book value (iii) Buildings (iii) Book value (iii) Buildings (iii) Book value (iii) Buildings (iii) Buildings (iii) Book value (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Buildings (iii) Book value (iii) Buildings (iii) Bu	b		639,9	754,532	76	1,795			
e Other expenditures for facilities and programs	С	Net investment earnings, gains, and losses .	984,6	671,472	(6.	59,057	)		
e Other expenditures for facilities and programs	d	Grants or scholarships	528,21	270,947	40	8,673			
f Administrative expenses g End of year balance	е	la contraction of the contractio							
f Administrative expenses g End of year balance		· i	152,4	70 27,090	4	16,340			
g End of year balance	f								
Provide the estimated percentage of the year end balance held as  Board designated or quasi-endowment   32.56 %  c Term endowment   32.56 %  c Term endowment   32.56 %  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations   3a(i)   X  (ii) related organizations   3a(ii)   X  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?    Describe in Part XIV the intended uses of the organization's endowment funds  Part VI   Land, Buildings, and Equipment. See Form 990 Part X line 10  Describe in Part XIV the intended uses of the organization's endowment funds  b Buildings   c Leasehold improvements   d Equipment   45,013   22,593   22,420 e Other   Other   Other    Other    Other    Other	o		7,163,26	6,219,401	5,09	1,434	· · · · · · · · · · · · · · · · · · ·		
a Board designated or quasi-endowment ▶ 32.56 %  c Term endowment ▶ 61.63 %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations			nd balance held a	as	L				
b Permanent endowment ▶ 32.56									
Term endowment ▶ 61.63 %  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations		·							
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations (iii) related organ									
organization by  (i) unrelated organizations Sa(i) unrelated organizations Sa(i) unrelated organizations Sa(ii) related organizations Steed as required on Schedule R? Sa(ii) are the related organizations listed as required on Schedule R? Sa(iii) are the related organization sendowment funds  Part VI Land, Buildings, and Equipment. See Form 990 Part X line 10  Description of investment (a) Cost or other basis (b) Cost or other basis fother) depreciation (c) Book value depreciation (c) Buildings Suldings	3a	Are there endowment funds not in the possessi	on of the organiz	ation that are held and	administere	d for the			
(ii) unrelated organizations		<u>'</u>	·					Yes	No
(ii) related organizations								· 3a(1)	X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		(v) related organizations						<del></del>	
4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. See Form 990 Part X line 10  Description of investment (a) Cost or other basis (b) Cost or other basis (other) depreciation  1a Land	h						. <b></b> .	<del></del>	
Part VI Land, Buildings, and Equipment. See Form 990 Part X line 10  Description of investment (a) Cost or other basis (b) Cost or other basis folher) (c) Accumulated depreciation  1a Land	4							<u> </u>	
Description of investment  (a) Cost or other basis (b) Cost or other basis fother)  1a Land · · · · · · · · · · · · · · · · · · ·	Par								
Investment   basis (other)   depreciation	<u>I ai</u>				t or other	(c) A	ccumulated	(d) Book value	
b Buildings		Sessipaon of arrestation	1	, , ,			i		
c Leasehold improvements         45,013         22,593         22,420           e Other	1a	Land · · · · · · · · · · · · · · · · · · ·							
d Equipment	b	Buildings	[				1		
e Other · · · · · · · · · · · · · · · · · · ·	С	Leasehold improvements · · · · · · · · · ·	[	i	-		<u>i</u>		- ·-
	d	Equipment	[		45,013		22,593	22,	420
Total. Add lines 1a through 1e (Column (d) must equal Form 990 Part X, column (B), line 10(c) ) · · · · · · · · · · • 22,420	-								
	Total	. Add lines 1a through 1e. (Column (d) must equ	ual Form 990 Pa	rt X, column (B), line 10	O(c) )		· · · · •	22,4	120

Schedule D (Form	990) 2010 New Jersey Cl	ty University Foundation	on, Inc 23-	-7261698 Page 3
Part VII	Investments - Other Securities.	See Form 990 Part X line 12		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Meitrug or v Cost or end-of-year n	
(1) Financial de	erivatives	•		
(2) Closely-nel	d equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
<del>-(1)</del>				
	must equal Form 990, Plant X, col. (B) line 12:	<del></del>		
Part VIII		See Form 990 Part X, line 13		
C. GIL VIII	(a) Description of investment type	(b) Book raine	tel Manuar at	No. Mar. o.
	(a) Description of investment type	(b) Book Jarie	(c) Melhod of va Cost or end-of year m	
(1)				
(2)				
(3)				
(4)		1		
(5)				
(6)		-		
(7)		<del> </del>		
(8)		<del> </del>		
(9)				
(10)	must equal Form 990 Part X cot (R) line 13.)	<del> </del>		
	THEOR EQUAL TOTAL COST (B) INC. 15 )	0.15	······································	
Part IX	Other Assets. See Form 990 Part X In	Description		(b) Book value
(1)			<del></del>	1
(2)				
(3)				
(4)				
(5)				!
(6)				
(7)				
(8)				_ <del>-</del>
(9)			<del></del>	
(10)				
	(b) must equal Form 990 Part X, col (B) line			
-	Other Liabilities. See Form 990 Part X.			
(1) Federal in	(a) Description of liability	(b) Amount		
	come taxes			
(2)		T		
(4)		<del> </del>		
(5)				
(6)		+		
(7)				
(8)		-		
(9)				
(10)				
(11)		,		
	must equal Form 990 Part X cot (B) line 25 )			
	740) Footnote In Part XIV, provide the text of	the footnote to the organization's	financial statements that report	s the
	ability for uncertain tax positions under FIN 48		·	

Sched	New Jersey City University Foundation, Inc	23-7261698	Page
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stat	ements	
1	Total revenue (Form 990 Part VIII, column (A) line 12)	1	1,061,665
2		2	1,218,083
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	(156,418
4	Net unrealized gains (losses) on investments	4	863,425
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	863,425
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 · · · · · · · · · · ·	10	707,007
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue gains and other support per audited financial statements	1 1 :	2,951,462
2	Amounts included on line 1 but not on Form 990. Part VIII. line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
С	Recoveries of prior year grants · · · · · · · · · · · · · · · · · · ·	1	
d	Other (Describe in Part XIV ) · · · · · · · · · · · · · · · · · ·	-	
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		1,737,827
	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	1,213,635
3	Amounts included on Form 990 Part VIII line 12 but not on line 1	3 1	1,213,635
4		1	
a	Investment expenses not included on Form 990 Part VIII line 7b · · · · · · · 4a	-i }	
b	Other (Describe in Part XIV )	4 !	_
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	(151,970)
_5	Total revenue Add lines 3 and 4c (This must equal Form 990 Part I line 12) · · · · · · · · · · · · · · · · · · ·	1 5 (	1,061,665
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1	Total expenses and losses per audited financial statements	1	2,244,455
2	Amounts included on line 1 but not on Form 990 Part IX, line 25		
а	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	1 1	
b	Prior year adjustments	1 .	
С	Other losses · · · · · · · · · · · · · · · · · ·	1	
ď	Other (Describe in Part XIV)	1	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	1,026,372
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3 1	1,218,083
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990 Part VIII line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIV)	1	
-	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4.4	
- C	Total expenses Add lines 3 and 4c (This must equal Form 990 Part I line 18)	4c	1 210 000
	<del></del>	5	1,218,083
	t XIV   Supplemental Information		
	plete this part to provide the descriptions required for Part II lines 3 5 and 9 Part III lines 1a and 4 Part IV lines 1b		
and 2	b 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 p	art to provide any additional information		
Col	lections descriptions (Part III, line 4)		
AS I	PER FASB 116 PGH 11, THE FOUNDATION MAINTAINS PERMANENT ART COLLECTIONS THAT		
A) AI	RE HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC	SERVICE	
ዋልጥ፤	ER THAN FINANCIAL GAIN;		
	IN THE PROPERTY.		
D	מינא מתשימים מול מעלי מענים מינו מולי מולים אווי מונים וויים אווי		
⇔) AI	RE PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED, AND		
C) AF	RE SUBJECT TO THE FOUNDATION'S POLICY THAT REQUIRES THE PROCEEDS FROM SALES OF		
COLI	ECTION ITEMS TO BE USED TO ACQUIRE OTHER ITEMS FOR COLLECTIONS		

Schedule D (Form 990) 2010 New Jersey City University Foundation, Inc	23-7261698	Page 5
Part XIV Supplemental Information (continued)		
	-	
02. Endowment funds intended uses (Part V, line 4)		
THE FOUNDATION'S ENDOWMENT FUNDS ARE INTENDED TO BE USED TO PROVIDE FUNDI	NG TO NEW JERSEY	
CITY UNIVERSITY FOR SCHOLARSHIPS TO MATRICULATED STUDENTS		
03 Other manager and under on Form 000 (Part VII land	41-1	
03. Other revenues included on Form 990 (Part XII, line	4D)	
RECLASS OF SPECIAL EVENT EXPENSES \$151,970		
		<del>-</del>
		<del></del> .
04. Other expenses not included on Form 990 (Part XIII,	line 2d)	
RECLASS OF SPECIAL EVENT EXPENSES. \$151,970		
		····
	<del></del>	

#### SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ

See separate instructions

OMB No 1545-0047 2010 Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Inspection

New Jersey	City Unive	ersity F	oundat:	lon, I	nc.	23-	7261698
	Iraising Activitie 990-EZ filers are n				wered "Yes' to For	m 990 Part IV line 1	17
	er the organization ra				ctivities Check all th	at apply	
a Mail solicita	itions		е	Solicitation	n of non-government	grants	
b Internet and	d email solicitations		f	Solicitation	n of government gran	ts	
c Phone solic	citations		g	Special fu	ndraising events		
d In-person s	olicitations						
2a Did the organi	zation have a written i	or oral agreemer	it with any inc	dividual (inc	luding officers, direct	ors trustees	
or key employ	ees listed in Form 990	Part VII) or ent	ity in connec	tion with pr	ofessional fundraising	g services? Y	'es No
b If "Yes " list the	e ten highest paid ind	ividuals or entitie	s (fundraiser	s) pursuant	to agreements unde	r which the fundraiser is	•
to be compens	sated at least \$5 000 l	by the organizati	on				
	dress of individual	(ii) Activity	(iii) Did fund		(iv) Gross receipts	(v) Amount paid to	I (vi) Amount paid to
or entity (f.	undraiser,	i	custody or contribu		from activity	cricetal led hy, fundraiser listed in	t organization
		<u> </u>			· 	COI (I)	314311120131
			Yes	No		1	1
1					1		
		1				1	
2	2.2.4					1	Ī
	<del></del>		_	·	<u> </u>	<del> </del>	<del></del>
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4							<u> </u>
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5					1	1	i
6						!	
7				ļ	<u> </u>		1
						<u> </u>	
8			İ		<u> </u>	!	I
9		i		<del> </del>			
•							
10				1			1
		I	i			 	Ĺ
					1	1	
Total · · · · ·		<i>.</i>		· · · · <b>&gt;</b>			·
3 List all states in	which the organization	n is registered o	r licensed to	solicit contr	ibutions or has been	notified it is exempt from	n
registration or li	censing						
						<u></u>	
							-
			·-			<del></del>	

EEA

	rt I	Fundraising Events. Co than \$15,000 of fundraising	mplete if the organizati		orm 990, Part IV line 18	
		gross receipts greater than	(a) Event #1 80th Gala	(b) Event #2 Concert	(c) Other events	(d) Total events Add col (a) through
R e			(event type)	(event type)	(total number)	col (c))
e n	, 1 , 2	Gross receipts · · · · · Less Charitable	339,605	34,156	11,922	385,683
e	3	contributions · · · · · · · · · · · · · · · · ·	223,607	6,561	<del>-</del>	230,168
	<u> </u>	minus line 2) · · · · · · · ·	115,998	27,595	11,922	155,515
_	4	Cash prizes				
D r	5	Noncash prizes · · · · · · ·	1,873			1,873
e C t	6	Rent/facility costs · · · · · · ·	36,134	ļ		36,134
E	7	Food and beverages · · · · ·	67,539			67,539
p e n	8	Entertainment	15,108			15,108
s e s	9	Other direct expenses · · · · · [	21,616	9,700		31,316
	10 11 rt	Net income summary Combine line  Gaming. Complete if the	e 3 column (d) and line 1	0	<u> </u>	( 151,970 ) 3,545
		than \$15,000 on Form 990		(b) Pull laus/instant	(c) Other gaming	(d) rotal garbing radd
Revenue		-	(4) 5 1190	bingo/progressive bingo	tel Office dentities	col (a) through col (c);
e D	1	Gross revenue · · · · · ·			<del></del>	
_rect	2	Cash prizes · · · · · · · · · · · · · · · · · · ·				
E	3	Noncash prizes · · · · · ·				
pens	4	Rent/facility costs · · · ·			 	
s e s	5_	Other direct expenses · · · ·			!	
	6	Volunteer labor	Yes %	Yes %	Yes %	
	7	Direct expense summary Add lines	2 through 5 in column (d)		· · · · · · · • [.	<u>(                                    </u>
	8	Net gaming income summary Com	bine line 1 column d and	Ine 7 · · · ·	· · · · · · · • • • • • • • • • • • • •	
9		ter the state(s) in which the organizal	· · · · · · · · · · · · · · · · · · ·			
a b		he organization licensed to operate on the organization licensed to operate of the organization of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed to operate of the organization licensed the organization licensed to operate of the organization licensed the organization li	gaming activities in each o	f these states?		· · · Yes No
		re any of the organization's gaming l	icenses revoked suspend	led or terminated during the	tax year?	· · · Yes No

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Schodule I (Form 990) (2010)

### SCHEDULE J (Form 990)

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

▶ Attach to Form 990

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

► See separate instructions

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

New Jersey City University Foundation, I

Employer identification number 23-7261698

Pa	rt I Questions Regarding Compensation				
			_	Yes	No
1a	Check the appropriate box(es) if the organization provide	ed any of the following to or for a person listed in Form	,		
	990, Part VII Section A line 1a Complete Part III to pro	ovide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			ļ
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g. maid chauffeur chef)	[	<u> </u>	}
h	If any of the boxes on line 1a are checked, did the organi	ization follow a written policy regarding payment	,		
-	or reimbursement or provision of all of the expenses desi			•	•
	explain · · · · · · · · · · · · · · · · · · ·		, 1b	ł	ı
2	Did the organization require substantiation prior to reimbi				
	officers directors, trustees, and the CEO/Executive Directors		, 2	,	ı
3	Indicate which, if any, of the following the organization us	ses to establish the compensation of the			
-	organization's CEO/Executive Director Check all that ap		i i		
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study	!		
	Form 990 of other organizations	Approval by the board or compensation committee	!		
	•				
4	During the year did any person listed in Form 990 Part V	VII, Section A line 1a with respect to the filing			
•	organization or a related organization	· · · · · · · · · · · · · · · · · · ·			
а	Receive a severance payment or change-of-control payment	nent from the organization or related organization?	' 4a		X
b		nonqualified retirement plan?	4b	!	X
c	Participate in or receive payment from an equity-based		4c		X
•	If "Yes' to any of lines 4a-c list the persons and provide				
	,		.	1	
	Only section 501(c)(3) and 501(c)(4) organizations mu	ust complete lines 5-9	!!	!	
5	For persons listed in Form 990 Part VII Section A line 1		1 1		
_	compensation contingent on the revenues of		i		
а	The organization?		5a	i	Х
b			5b		Χ
_	If "Yes" to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990 Part VII Section A line 1	tal did the organization pay or accrue any			
-	compensation contingent on the net earnings of	•	į !	1	
а	The organization?		6a	i	_X_
h	Any related organization? • • • • • • • • • • • • • • • • • • •		6b	- <del></del>	X
	If "Yes" to line 6a or 6b describe in Part III				
7	For persons listed in Form 990 Part VII Section A line 1	tal did the organization provide any non-fixed	!!!	ŀ	
,	payments not described in lines 5 and 6? If 'Yes, descr		7		Х
0	Were any amounts reported in Form 990 Part VII paid of		, '	+	
8	to the initial contract exception described in Regs section				
			l R		Х
^	If 'Yes to line 8, did the organization also follow the rebu		- :	:	Λ
9	Regulations section 53 4958-6(c)? · · · · · · · · · · ·		0	,	
	requiations section so 4550-0(c)		-		

Page 2

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed For each individual whose compensation must be reported in Schedule J. report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990. Part VIII

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

;	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(F) Jotel of columns	(4) (
(A) Name	(i) Base compensation	(a) Bonus & incentive compensation	(iii) (Jither reportable compensation	other deferred compensation	benefits	(B)(t)-(D)	(r) Compensation reported in prior from 990 or Form 990 EZ
ļ —	12,16	0	0	066	308	13,463	0
William Fellenberg (")	; ;	ļ	0	0	0	0	0
	14,182		0	721	82	14,985	0
2 Aaron Aska (II)		0	0	0	0	0	0
3	58,829		0	8,498	343	67,670	0
3 Khatmeh Osseiran-Hanna(II)			0	0	0	0	0
Ξ							
(II)	:	:					
			-				
(a)		!		:		<del></del>	!
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16	· · ·					-	

Schedul: 1 (Form 990) 2010

any additional information

Page 3

6a, 6b, 7 and 8 Also complete this part for 23-7261698 Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c 5a, 5b Supplemental Information

# officer info) ij organization compensation (Part II 01. Unrelated

THE INTERIM VICE-PRESIDENT FOR UNIVERSITY ADVANCEMENT, WILLIAM FELLENBERG, TOOK ON THE RESPONSIBILITIES AS THE INTERIM FOUNDATION THE FOUNDATION IN APRIL 2011 THE VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT, KHATMEH OSSEIRAN-HANNA, RESIGNED AT WHICH TIME AN THESE EMPLOYEES ARE NOT REPORTED IN PART VII OR THE UNIVERSITY'S PRESIDENT, VICE SYSTEM TOP FIVE HIGHEST PAID EMPLOYEES OVER \$100,000 OFFICIO DIRECTORS OF UNIVERSITY'S PAYROLL ΕX PRESIDENT FOR ADMINISTRATON AND FINANCE, AND VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT SERVE AS THE BY NJCU AND ARE PAID THROUGH ADDITION, THREE MEMBERS OF THE FOUNDATION'S BOARD OF DIRECTORS ARE APPOINTED BY NJCU. DIRECTORS, OFFICERS, KEY EMPLOYEES, OR THE FOR THEIR SALARY, WHICH IS REPORTED IN PART IX TWO INDIVIDUALS WHO DO WORK FOR THE FOUNDATION ARE EMPLOYED NOT THEY ARE FOUNDATION REIMBURSES NJCU BECAUSE EXECUTIVE DIRECTOR SCHEDULE J ZH

Βĭ BEEN REPORTED AS PAID FOR THE VICE NJCU AS AN UNRELATED ORGANIZATION BECAUSE THEY ARE PAID BY NJCU FOR THEIR EMPLOYMENT, WHICH INCLUDES SIGNIFICANT TIME OF A "RELATED ORGANIZATION" UNDER THE FORM 990 PORTION OF 4 HAS HOWEVER, PRESIDENT FOR ADMINISTRATION AND FINANCE AND VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT SALARIES THE FOUNDATION DOES NOT PAY THEIR SALARIES AND IT DOES NOT REIMBURSE NJCU FOR THEIR TIME NJCU DOES NOT FALL UNDER THE DEFINITION FOUNDATION THE THEIR ROLES AT INSTRUCTIONS

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#### SCHEDULE M (Form 990)

#### **Noncash Contributions**

OMB No 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

_	Jersey City University	Foundation	, Inc.		23-7261	698		
Pa	rt I Types of Property							······
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	•	(d) od of det		-
1	Art-Works of art	x	12	5,723	Market			
2	Art-Historical treasures · · · ·							
3	Art-Fractional interests · · · ·							
4	Books and publications · · · · ·	X		33,660	Market	Valu		
5	Ciothing and nousehold							
ŭ	goods	<b>!</b> 			1			
6	Cars and other vehicles		1		<u> </u>		·	
7	Boats and planes • • • • • • • •							
8	Intellectual property · · · · ·							
9	Securities-Publicly traded							
10	Securities-Closely held stock · · !			<del></del>				
11	Securities-Partnership, LLC,			<del></del>				
	or trust interests				!			
12	Securities-Miscellaneous - · · ·	·····			<u> </u>			
13	Qualified conservation							
	contribution - Historic	,			i			
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate-Residential · · · · ·							
16	Real estate-Commercial · · · ·				•			
17	Real estate-Other · · · · · · ·					~		
18	Collectibles	х	1	215	Market	Value	e	
19	Food inventory				İ			
20	Drugs and medical supplies · · ·							
21	Taxidermy				T			-
22	Historical artifacts						_ ~	
23	Scientific specimens · · · · · [							
24	Archeological artifacts							
25	Other (Equipment )	x	1	4,895	Market	Value	3	
26	Other (Gift Cards )	х	2	175	Market	Value	3	
27	Other ▶( )							
28	Other ▶()							
29	Number of Forms 8283 received by	the organizatio	n during the tax year for contrib	utions for				
	which the organization completed F	orm 8283, Part	IV Donee Acknowledgement -	· · · · · · · · · · · · · · · · · · ·	. 29			
							Yes	No
30a	During the year did the organization	n receive by cor	tribution any property reported	in Part I, lines 1-28 that				
	it must hold for at least three years	from the date of	the initial contribution, and whi	ich is not required to be		- [		Ì
	used for exempt purposes for the e	ntire holding per	rod?			- 30a	1	X
b	If "Yes," describe the arrangement	in Part II						
31	Does the organization have a gift at	cceptance policy	that requires the review of any	non-standard		1		
	contributions?					. 31	Х	İ
32a	Does the organization hire or use th	•						<u></u>
	contributions?					· ; 32a		X
b	If "Yes " describe in Part II							
33	If the organization did not report an	amount in colur	nn (c) for a type of property for	which column (a) is cnecked		!		ĺ
	5					]	1 1	i

#### SCHEDULE O (Form 990 or 990-EZ)

#### 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

OMB No 1545 0047

2010 Open to Public

Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization New Jersey City

New Jersey City University Foundation, Inc.

23-7261698

Ol Officer, directors, etc family relationship (Part VI, line 2)
THREE OF THE DIRECTORS OF THE FOUNDATION ARE ALSO THE MEMBERS/OFFICERS OF NEW JERSEY CITY
UNIVERSITY
02 Member election for additional members (Part VI, line 7a)
THREE OF THE FOUNDATION'S DIRECTORS ARE REPRESENTATIVES OF NEW JERSEY CITY UNIVERSITY
(NJCU). THESE INCLUDE THE PRESIDENT OF NJCU, THE VICE PRESIDENT FOR ADMINISTRATION AND
FINANCE, AND THE VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT. THE REMAINING MEMBERS ARE
ELECTED BY THE BOARD OF DIRECTORS OF THE FOUNDATION FROM NOMINEES PROPOSED BY A NOMINATING
COMMITTEE APPOINTED BY THE CHAIRMAN OF THE BOARD, WITH THE BOARD'S APPROVAL
03. Form 990 governing body review (Part VI, line 11)
THE RETURN IS PREPARED INTERNALLY BY THE FOUNDATION'S STAFF AND IS THEN REVIEWED BY AN
INDEPENDENT ACCOUNTING FIRM (KPMG) ONCE THE FORM 990 IS FINALIZED, THE ENTIRE BOARD OF
DIRECTORS IS PROVIDED A COPY FOR REVIEW PRIOR TO FILING THE RETURN WITH THE IRS
04 Conflict of interest policy compliance (Part VI, line 12c)
NEW JERSEY CITY UNIVERSITY FOUNDATION ANNUALLY DISTRIBUTES A CONFLICT OF INTEREST
DISCLOSURE FORM TO EACH BOARD MEMBER ALL BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES ARE
REQUIRED TO COMPLETE AND SIGN THE DISCLOSURE FORM THE BOARD OF DIRECTORS OF THE
FOUNDATION WOULD ADDRESS ANY CONFLICTS BROUGHT TO ITS ATTENTION
05. Other officer or key employee compensation (Part VI, line 15b)
THE FOUNDATION DOES NOT HAVE A FORMAL COMPENSATION DETERMINATION PROCESS BECAUSE IT DOES
NOT PAY ANY OF ITS DIRECTORS OR OFFICERS, AND HAS NO KEY EMPLOYEES

Schedule O (Form 990 at 990-EZ) (2010)		Page 2
Name of the organization	Employer identification number	
New Jersey City University Foundation, Inc	23-7261698	
	<del></del>	
06. Governing documents, etc, available to public (Part VI, line 19)		
ov. develining decements, etc., available to public (laft vi, line 19)		
THE ORGANIZATION CURRENTLY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF IN	TEREST POLICY AND	
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST	<del> </del>	
07 Audited by an independent accountant (Part XII, line 2b)		
THE FOUNDATION'S FINANCIAL STATEMENTS WERE AUDITED BY AN INDEPENDENT ACC	OUNTING	
FIRM(KPMG) ADDITIONALLY, NEW JERSEY CITY UNIVERSITY FOUNDATION IS CONSI	DERED A COMPONENT	
THIT OF NEW TEDGEY CITY INTUEDGITY AS DED CASE 20 "DETERMINING ENTERHER.	CEDMATN	
JNIT OF NEW JERSEY CITY UNIVERSITY AS PER GASB 39, "DETERMINING WHETHER	- ERIAIN	
ORGANIZATIONS ARE COMPONENT UNITS" AS SUCH, THE FOUNDATIONS'S STATEMENT	S OF FINANCIAL	
		·
POSITION, STATEMENT OF ACTIVITIES, AND STATEMENT OF CASH FLOW ARE PRESEN	red in the	
UNIVERSITY'S FINANCIAL STATEMENTS THEREFORE, PART IV, LINE 12a AND PART	XII, LINE 2b WERE	
ANSWERED "YES"		
08 Explanation of other changes in net assets or fund balances (Part XI	, line 5)	
THE INTERIOR CLAVE ON THE CHARGE ACCOUNTS		
NET UNREALIZED GAINS ON INVESTMENTS \$863,425		
		***
99 General explanation attachment		
PART VII SECTION A - OFFICERS, DIRECTORS, TRUSTEES		
R WILLIAM FELLENBERG WAS APPOINTED INTERIM EXECUTIVE DIRECTOR IN MAY 20	)11 UPON THE	
RESIGNATION OF KHATMEH OSSEIRAN-HANNA.		
ESIGNATION OF MATREE OSSETAN-HANNA.		<del></del>