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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Dep: Inter	artment of the	e Treasury Service	► TI	ne organization ma	y have to use a copy o	of this return to satis	sfy state report	ing requirem	nents.		(nspection	
A	For the 2	011 calend	lar year, or tax				, and endin				2012	
В	Check if app				University					er Identi	fication Number	
	Address	s change	Doing Business	As				_	06-	0332	975	
	Name o	hange	Number and str	eet (or PO box if i	mail is not delivered to	street addr)	Room/s	suite	E Telepho	ne numb	er	
	Initial re	eturn	459 Colle	ge Street					(20	3) 43	32-0172	
	Termina	ated	City, town or co	ountry		State	ZIP code + 4					
	Amende	ed return	New Haven			CT	06511		G Gross r	eceipts \$	613,407.	
	Applica	tion pending	F Name and addr	ess of principal office	cer	· · · · · · · · · · · · · · · · · · ·		H(a) is this				
			Stephen Park	s 44 Templ	e Court New	Haven C	T 06511		affiliates incl		Yes No	
I	Tax-exem	pt status	X 501(c)(3)	501(c) ()◀ (insert no.)	4947(a)(1) or	r 527	II NO,	attach a list	(see mst	ructions)	
J	Website	e: ► N/I	A					H(c) Group	exemption nu	ımber 🟲		
K			X Corporation	Trust As	sociation Other	L	Year of Formal	ion 191	l Ms	tate of le	gal domicile: CT	
P		Summary										
					r most significan							
ø					mbership ar		<u>e Univ</u> e	rsity	COMMU	<u>lity</u>		
Ĕ	<u>of</u>	_a_lare	<u>der abbrec</u>	<u>ciation_o</u>	f_literatur	e						
Activities & Governance	0		77667.									
ô					scontinued its ope body (Part VI, lir		osed of mor	e than 25%	% of its ne		is.	
. ಇ					the governing bod		1b)		• •	3	<u>_</u> 6	
Ęį				•	endar year 2011	•	•		. 1	5	3	
Ž.			of volunteers (e		•					6	26	
ĕ	7a Tota	al unrelate	d business reve	nue from Part	VIII, column (C),	line 12				7a	0.	
	b Net	unrelated	<u>business taxab</u>	le income from	Form 990-T, line	34 .	<u> </u>			7b		
	_							Р	rior Year		Current Year	
•			and grants (Pai					·	752,4	98.	611,870.	
Ę		-	ce revenue (Pa							- _+		
Revenue			•		nes 3, 4, and 7d)			-		2.	2.	
ш.				-	5, 6d, 8c, 9c, 10c,			·		75.	249.	
					st equal Part VIII, olumn (A), lines 1		ie (2)	+	752,4		612,121.	
			•		• •				34,4	00.	41,188.	
i		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 121,168.										
8				· -		iumn (A), iines	5-10)	-	121,1	00.	130,321.	
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)											
ğ.	b Tota	b Total fundraising expenses (Part IX, column (D), ime-25 (Part IX, column (D), ime-25 (Part IX, column (A), lines 1 a-11d, 11f-24e)										
ш	I/ Oth	er expense	es (Part IX, coll	ımn (A), iin e s i	i∦a-i⊤ o;~FH -≥4e)	Annual Printers and Paris			353,5		295,697.	
I	18 Tota	al expense:	s. Add lines 13-	·17 (must equ <u>a</u>	Part IX, column in line 12 2 1	(A), line 25)			509,0		467,206.	
	19 Rev	enue less	expenses Subt	ract line 18 ff	William 15 C T	2012 9			243,3		144,915.	
Assets or 1 Balances			.	- 1					g of Curren		End of Year	
4 H			Part X, line 16)	<u>, </u>	OGDEN,	UT !	•	3	,824,3		3,754,907.	
Net A			(Part X, line 2	•	•		•			0.	0.	
			fund balances.	Subtract line 2	1 from line 20		<u></u>	3	,824,3	47.	3,754,907.	
		ignature										
Unde	r penalties of plete. Declara	f perjury, I dec ition of prepar	clare that I have exa er (other than office	mined this return, in r) is based on all int	ncluding accompanying formation of which pre	schedules and state parer has any knowle	ements, and to ledge	the best of m	y knowledge	and belie	ef, it is true, correct, and	
			XION	\ <u></u>							······································	
C:		Signature	e of officer	a daya			•	Dai	le Mine	LOCK.	~	
Sig He	iu i			C13.00		C > . OPCZ	2.0					
ne	16		hen Parks	CAR	FIR, BOALD	of DIRPCTO	λ<7					
			eparer's name	Pra	nar's sporting	00	Date ,		Charle	, F	PIN	
_			L. O'Sull	/1>	WIKM	$U \rightarrow$	11/13	1,2	Check _	ן יינ	200195799	
Pa	id eparer			O'SULLIVA	AN & PRIEST	LLC.	1119/		self-employe	:0 [1	VU133133	
Us	e Only	Firm's name		URCH ST S		, 1110.			Eremie Eller	≥ 27	1065109	
		Firm's addres	NEW HA		JIE 003	CT 0651	10-2005		····	(203		
Mai	the IDS	discuss the			vn above? (see ir		10-2003	l	Phone no	1203	X Yes No	
					eparate instruction			EA0101 07/	05/11		Form 990 (2011)	
	- rvi ral	CITYUIR RE	COULIUII MEL ME	ハロンじょ コビモ いパ ろ	vvaiate monutil	v1131	16.0		UJ/ 1 1		1 01111 330 (2011)	

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			res	NO
1	Is the organization described in section 501(c)(3) or $4947(a)(1)$ (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	_ 3_		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4_		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	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		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	х	
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			
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11a	х	
I	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	116		х
•	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
1	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	11 f		<u> x</u>
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		X
١	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		_ X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		<u>x</u> _
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u> </u>
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	x	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	x	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23_		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		x
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		Х
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		_X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		_x_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u>X</u>
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II .	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
ı	b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	_	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u>x</u> _
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		<u>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	38	Х	
3AA	A	Form	990 ((2011)

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Form 990 (2011) Yale University Elizabethan Club Corp Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V				\Box
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	10	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	3		5,
	If at least one is reported on line 2a, did the organization file all required federal employment			Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins		2b		
			3-		v
	Did the organization have unrelated business gross income of \$1,000 or more during the year If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	•	3a		X
	·		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.)	or other authority over, a nancial account)?	4a		х_
	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 Fi				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	=	5a		<u>X</u> _
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5b		X
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, ar solicit any contributions that were not tax deductible?	nd did the organization	6a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such coinct tax deductible?	ntributions or gifts were	6ь		
7	Organizations that may receive deductible contributions under section 170(c).				
ai	Did the organization receive a payment in excess of \$75 made partly as a contribution and pa	artly for goods and			
	services provided to the payor?	irtly for goods and	7a		Х
Ы	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?	ich it was required to file	7c		х
d i	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e l	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7e		Х
f l	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	fit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organizatio as required?	n file Form 8899	7 g		
h i	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, hat holdings at any time during the year?	g organizations. Did the ve excess business	8		Х
	Sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?		9a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
	Section 501(c)(7) organizations. Enter				
	initiation fees and capital contributions included on Part VIII, line 12	10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	Section 501(c)(12) organizations. Enter	<u> </u>	<u> </u>		
	Gross income from members or shareholders .	11 a			
b (Gross income from other sources (Do not net amounts due or paid to other sources				
- 7	against amounts due or received from them.)	116			
12a :	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	1 1	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	s the organization licensed to issue qualified health plans in more than one state?		13a		
ı	Note. See the instructions for additional information the organization must report on Schedule	0			
b l	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	136			
c l	Enter the amount of reserves on hand	13c			
14a (Did the organization receive any payments for indoor tanning services during the tax year?		14a]	Х
b !	f 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in So	hedule O	14b		

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Part Wi 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

Se	ection A. Governing Body and Management	<u> </u>		
			Yes	No
1	1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	6		
	b Enter the number of voting members included in line 1a, above, who are independent	6		[;
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		Х
		-		
	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
_	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		v
	5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
ě	6 Did the organization have members or stockholders?	6	-	X
7	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Х
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7b		х
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
	a The governing body?	8a	Х	
	b Each committee with authority to act on behalf of the governing body?	8b	Х	
9	9 Is there any officer, director or 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		Х
<u>Se</u>	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10	0 a Did the organization have local chapters, branches, or affiliates?	10 a		X
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 Ь		
11	1 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		X
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12	2a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	_x	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c	х	
	3 Did the organization have a written whistleblower policy?	13	X	
14	4 Did the organization have a written document retention and destruction policy?	14	Х	
15	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?			
	a The organization's CEO, Executive Director, or top management official	15a	X	
	b Other officers of key employees of the organization	15 b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16	6 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х
	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	7 List the states with which a copy of this Form 990 is required to be filed >		. _	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply	ıvaılable	for pu	blic
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements are the public during the tax year	alable to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.			
_		(203)_4		
BA	AA TEEA0106 01/23/12	Form	990 ((2011)

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

X Check this box if neither the organization	nor any r	elated	org			n com	pen	sated any current officer	cer, director, or truste	e
(A) Name and title	(B) Average hours per week	unles	s per	Pos ck mo	s boti	nan one h an offi rustee)	box. cer	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (describe hours for related organiza tions in Schedule O)	hours for c. d. S. S. Z. PJZ S.		related organizations (W-2/1099-MISC)	from the organization and related organizations					
(1) Stephen Parks										
Director Chair	4.00	X			<u> </u>	ļi	_	0.	0.	0.
(2) Marie Boroff Director	1.00	x						0.	0.	0.
	1.00	x						0.	0.	0.
(4) Charles Ellis Director	1.00							0.	0.	0.
(5) Richard Selzer Director	1.00	Х						0.	0.	0.
(6) David F. Swensen Director	1.00	Х						0.	0.	0.
(7) Roberta Frank President	4.00			х				0.	0.	0.
(8) Jonny Dach Vice President	2.00			x				0.	0.	0.
(9) Jan Simpson Grad Secretary/Treasurer	2.00			x _				0.	0.	0.
(10) Philip Kaplam Undergrad Secretary	2.00			х				0.	0.	0.
(11) Annie Shi Undergrad Treasurer	2.00			х				0.	0.	0.
(12)										
(13)										
(14)										

Page 8

Ran VIII Section A. Officers, Directors, Trust	ees, I	€ey	Em			es,	and	d Highest Con	pensated Em	oloyees (cont)
		Position (do not check more than one						·	_	
(A) Name and title	(B) Average hours	box	. unle	ss pe	rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	1 000			_	_		·	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	week (describ e hours for related organi- zations	directo	nstitutional trustee	Officer	Key employee	ploye	Former			organization and related organizations
	related organi-	if trust	nal tru		loyee	ompe		İ		
	zations in Sch O)	æ	ıstee			Highest compensated employee				
(15)				-		-				
<u>(16)</u>										
(12)							-			
(18)										
(19)										
(29)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							>	0.	0	. 0.
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	١						>	0.	0	. 0.
2 Total number of individuals (including but not limited	to thos	e lis	ted	abo	ve) v	who	rece			
from the organization										
2. Did the exponential list any farmer officer director.		ا مما			مريما		استطا	haat ***********		Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc	dividua	ee, r	еу е	empi	loye	e, or	ng	nest compensated	гепрюуее	3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th	ortable	con	npen	sati	on a	and o	the	r compensation fro	om	
such individual	анфіэ	0,00	0, 11	1 16	:S C	σπρ	iele	Scriedule 3 loi		4 X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpens	atior	n from	m ai	ny u	nrela	ated	organization or in	ndıvıdual	5 X
Section B. Independent Contractors	,,,p,ctc		.000		, <u>,,,</u>	<u>Juci</u>	pui			
 Complete this table for your five highest compensate compensation from the organization. Report compen 	d indep sation	end for th	ent o	cont alen	ract dar	ors t vear	hat end	received more tha	n \$100,000 of the organization's	tax vear
(A) Name and business address		÷	···					(B Description		(C) Compensation
								-		
						_				······································
2. Total number of independent contraction (included to		Lura - A	~ d 1 -				4 a L	0.00) who see = :::: :	more than	· Street of the second section of the
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►	ut 110t		eu ((ว เกด)SE	15(6(. ab	ove) who received	more than	

Par	rt VIII Statement of Revenue		r — — — — — — — — — — — — — — — — — — —		
i		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
L	· · · · · · · · · · · · · · · · · · ·	 	revenue		512, 513, or 514
3 Z	1aFederated campaigns1a0	-			
EA.	b Membership dues 1b 840.	<u> </u>			
S, G	c Fundraising events 1c			}	
AR AR	d Related organizations 1d 551,863.				
VS,	e Government grants (contributions) 1 e	_			
ER S	f All other contributions, gifts, grants, and				
즲	f All other contributions, gifts, grants, and similar amounts not included above 1f 59, 167.				
F S	g Noncash contributions included in Ins 1a-1f \$ 0.				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	h Total. Add lines 1a-1f	611,870.			
PROGRAM SERVICE REVENUE	Business Code				
Ş.	2a				ļ
E 26	b			<u></u>	<u> </u>
Ζį	c				<u></u>
SER	d	<u> </u>			
AM	e				
S. S.	f All other program service revenue				
PR	g Total. Add lines 2a-2f	•			
	3 Investment income (including dividends, interest and				
	other similar amounts)	2.	2.	0.	0.
ļ	4 Income from investment of tax-exempt bond proceeds	·			
	5 Royalties		_		
	(i) Real (ii) Personal				, ,
	6a Gross rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				i
	7a Gross amount from sales of (i) Securities (ii) Other				
ì	assets other than inventory				
	b Less: cost or other basis				
	and sales expenses				
	c Gain or (loss)]			l
	d Net gain or (loss)				
J.	8a Gross income from fundraising events (not including \$				
OTHER REVENU	of contributions reported on line 1c)				1 1, 1
E .	See Part IV, line 18				4,.
弄	b Less: direct expenses b	1 .			, ,
۵ ا	c Net income or (loss) from fundraising events	•			
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities	·			
	10a Gross sales of inventory, less returns				
	10a Gross sales of inventory, less returns and allowances a 1,535.				
	b Less cost of goods sold b 1,286.]			
	c Net income or (loss) from sales of inventory	249.	249.	0.	0.
	Miscellaneous Revenue Business Code				
	11a				
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	·			
	12 Total revenue. See instructions	612,121.	251.	0.	0.

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)

	Check if Schedule O contains a response to any question in this Part IX											
Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	40,000.	40,000.									
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,188.	1,188.									
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16											
4 5	Benefits paid to or for members 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	128,861.	128,861.	0.	0.							
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)											
9	Other employee benefits	1,460.	1,460.	0.	0.							
10	Payroll taxes .											
11	Fees for services (non-employees)	,										
	Management											
ŧ	Legal .	12,257.	12,257.	0.	0.							
	Accounting											
	Lobbying .											
	Professional fundraising services See Part IV, line 17											
	Investment management fees											
	Other	6,409.	6,409.	0.	0.							
-	Advertising and promotion											
13	Office expenses .	52,853.	52,853.	0.	0.							
14	Information technology	3,442.	3,442.	0.	0.							
15	Royalties		3/1121		``							
16	Occupancy	29,017.	29,017.	0.	0.							
17	Travel	7,940.	7,940.	0.	0.							
	Payments of travel or entertainment expenses for any federal, state, or local public officials	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
19 20	Conferences, conventions, and meetings Interest											
21	Payments to affiliates			_ 								
22	Depreciation, depletion, and amortization			_ 								
	' ' '											
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)											
a	Miscellaneous	2,065.	2,065.	0.	0.							
	House maintenance, repair	0.	0.	0.	0.							
	& refurbishing	48,970.	48,970.	0.	0.							
	Grounds maintenance	15,226.	15,226.	0.	0.							
	All other expenses	117,518.	117,518.	0.	0.							
	Total functional expenses. Add lines 1 through 24e	467,206.	467,206.	0.	0.							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here	•	,=									
	SOP 98-2 (ASC 958-720) .				<u></u>							

Balance Sheet

Part X

(A) Beginning of year End of year 186,378 Cash - non-interest-bearing 1 314,599. 2 Savings and temporary cash investments 7,645 2 3,372. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 Inventories for sale or use 2,580 8 1,764. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 1,475,797 **b** Less accumulated depreciation 10 b 1,474,479 1,475,797. 10 c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 2,153,265 15 1,959,375. 3,754,907. Total assets. Add lines 1 through 15 (must equal line 34) 3,824,347. 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 22 of Schedule L Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 0. 26 0. Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 27 28 Temporarily restricted net assets 194,023. 28 317,971. Permanently restricted net assets 3,630,324. 29 3,436,936. Organizations that do not follow SFAS 117, check here > and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 3,824,347 33 3,754,907. 3,824,347. 3,754,907. Total liabilities and net assets/fund balances 34 34

BAA

Form 990 (2011)

Form 990 (2011) Yale University Elizabethan Club Corp	06-0332975	<u> </u>	Page 12						
Part ※ Reconciliation of Net Assets									
Check if Schedule O contains a response to any question in this Part XI									
	1 - 1								
1 Total revenue (must equal Part VIII, column (A), line 12)	1		<u>121.</u> 206.						
2 Total expenses (must equal Part IX, column (A), line 25)									
3 Revenue less expenses Subtract line 2 from line 1									
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))									
5 Other changes in net assets or fund balances (explain in Schedule O)	5	-214,	355.						
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 3									
Part Financial Statements and Reporting									
Check if Schedule O contains a response to any question in this Part XII									
		Yes	No						
1 Accounting method used to prepare the Form 990. X Cash Accrual Other			,						
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O									
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X							
b Were the organization's financial statements audited by an independent accountant?		2b X	1						
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2c	x						
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		, , ,	*						
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both:	ssued on a	in the							
X Separate basis Consolidated basis Both consolidated and separate basis									
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a	<u>x</u>						
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3b							
BAA		Form 990	(2011)						

TEEA0112 07/06/11

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service
Name of the organization

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

				izabethan Clu							<u> 33297</u>		
Pan	}-{}-*	Re	ason for Pub	lic Charity Status	(All organizations	must o	comple	ete this	part.)	See	nstruct	ions.	
The c	rga	nızat	ion is not a priva	te foundation because	it is (For lines 1 through	gh 11, cl	heck onl	y one bo	ox.)				
1		A ch	nurch, convention	of churches or assoc	iation of churches descr	ibed in :	section	170(b)(1)(A)(i).				
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	П	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	П	A m	edical research of	organization operated	in conjunction with a ho	spital de	escribed	ın secti	on 170(b)(1)(A)	(iii) Ente	er the hospit	tal's
		nam	ne, city, and state):		•						·	
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1)(A)(iv). (Complete Part II)											
6					vernmental unit describe								
An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)												scribed	
8	\sqcup	A co	ommunity trust de	escribed in section 17	0(b)(1)(A)(vi). (Complete	Part II.	.)						
9	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)												
10		An o	organization orga	nized and operated ex	clusively to test for pub	lic safet	y See s	section 5	509(a)(4).			
11	X	mor	e publicly suppor	ted organizations des	clusively for the benefit cribed in section 509(a) on and complete lines 1	(1) or se	ection 50	he funct)9(a)(2)	ions of, See se	or carry ction 50	out the 19(a)(3).	purposes of Check the I	f one or box that
		аГ	Туре І	b Type II	c X Type III	- Fund	tionally	integrate	ed		d \square	Type III -	Other
е		othe	checking this box or than foundation on 509(a)(2).	, I certify that the organ managers and other	inization is not controlled than one or more public	d directl	y or indi orted or	rectly by ganization	y one or ons desc	more d	squalifie section	ed persons 509(a)(1) o	or
f		If th		ceived a written deter	mination from the IRS th	nat is a	Type I, T	Гуре II о	r Type I	ll suppo	rtıng org	janization,	X
g				06 has the organization	on accepted any gift or	contribu	ition from	n anv of	the follo	owina n	ersons?		
9		01110	.c //agast 17, 200	o, nas inc organizatio	m decepted any gift of	COMMISSA	1011 1101	ii aiiy oi	the lon	ownig p		ſ	Yes No
		(i)	A person who d	directly or indirectly co	introls, either alone or to	gether v	with per	sons des	scribed i	ın (ıı) ar	id (iii)		163 110
		.,	below, the gove	erning body of the sup	ported organization?	900					- ()	11g (i)	X
		(ii)	A family memb	er of a person describ	ed in (i) above?							11 g (ii)	Х
		(iii)	A 35% controlle	ed entity of a person of	lescribed in (i) or (ii) abi	ove?						11 g (iii)	X
_h		Prov	ude the following	information about the	supported organization	(s)							
	•	(i) Na	ame of supported organization	(iı) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	Is the zation in i) listed in overning ment?	the organ	ou notify lization in n (i) of upport?	organiz	(vi) Is the organization in column (i) organized in the US?		
						Yes	No	Yes	No	Yes	No		
-						ļ			1	i			
A)	Ya	le	University	06-0646973	2	x		х		х		5	51,863.
				1									
B)							İ						
						T							
C)						1	1	i		!			
-/_				 	· · · · · · · · · · · · · · · · · · ·			 					
D)								1					
<u>-,</u>									-				
F١]				1					
<u>E)</u>				10	-	 	 		j.				
Total				ž .	,		1	i		,	:	E	51,863.
	E^-	Dan	enverk Beductio	n Act Notice see the	Instructions for Form 9	90 02 00	1 10-F7	L	<u></u>	Schedul	A (Enr	m 990 or 99	
		F 40	PERMITTED PORTION TO THE	or All Noute, See me	DISTRIBUTE OF FORD 9	- JU UI	ハルモ ん.				- A (FO)	770 01 44	ハーヒノコノロニ

3, 0

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support			<u> </u>			
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')			***			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						-
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			,			
6	Public support. Subtract line 5 from line 4	W. Application of the control of the	*		,		
Sec	tion B. Total Support				<u> </u>	2 2081	
– Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on			j			
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					الا الالاي وال ^{اش} ة المعالمين م	
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	
13	First five years. If the Form 990 organization, check this box and		tion's first, second,	third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	blic Support P	ercentage			····	
14	Public support percentage for 20	·		11, column (f))		14	<u> %</u>
15		•	•			. 15	<u> %</u>
	a 33-1/3% support test — 2011. If the and stop here. The organization	qualifies as a pub	licly supported orga	anızatıon			► [_]
ı	33-1/3% support test — 2010. If the and stop here. The organization				, and line 15 is 33	-1/3% or more, che	eck this box
17 <i>a</i>	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-ai	nd-circumstances' t	est, check this b	ox and stop here.	Explain in Part IV	0% how ► □
	o 10%-facts-and-circumstances to organization meets the 'facts-and	meets the 'facts-ar d-circumstances' to	nd-circumstances' t est. The organization	test, check this b on qualifies as a	ox and stop here. publicly supported	Explain in Part IV organization	how the
18 RAA	Private foundation. If the organization	zation did not ched	ck a box on line 13,	. 16a, 16b, 17a, c		box and see instruction of the form 99	

Partill 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)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants.')						
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b						<u></u>
8	Public support (Subtract line 7c from line 6)			E TO THE PROPERTY OF THE PARTY			
	tion B. Total Support		,	,	т		
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unirelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add Ins 9, 10c, 11, and 12)		L]			
14	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3) ▶□
	tion C. Computation of Pu						
	Public support percentage for 20	•	• •	e 13, column (f))		15	*
	Public support percentage from 2					16	<u></u>
	tion D. Computation of Inv						,
17	Investment income percentage for	•		-	nn (f))	17	8
18	Investment income percentage fr					18	
	33-1/3% support tests - 2011. If is not more than 33-1/3%, check						
	33-1/3% support tests - 2010. If line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qual	lifies as a publicly	supported organ	-1/3%, and ization ► □
20	Private foundation. If the organiz	ation did not ched	k a box on line 14	<u>4, 19a, or 19b, ch</u>	eck this box and s	ee instructions	

Schedule A	(Form 990 o	r 990-EZ) 2	2011 Y	ale	Univ	ersi	ty El	izabe	than	Club	Corp	06-	033297	5	Page 4
Schedule A	Suppleme Part II, Im (See instr	ental Info le 17a or luctions).	ormation 17b; an	i. Cor id Pa	nplete rt III,	this line 1	part to 2. Also	provio comp	le the lete th	explar us part	nations for an	required y additio	by Part nal infori	II, line 10 mation.);
						- - -									
_		- 	. – – – .												
			. – – – .							. – – – .					
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011
Open to Public Inspection

Employer identification number

	e University Elizabethan Clu			
Pa	祖 Organizations Maintaining Dono	r Advised Funds or Other Similar	Funds or Accounts. Complete if	
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) Funds and other accounts	
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and don- funds are the organization's property, subject to	or advisors in writing that the assets held in o the organization's exclusive legal control?	donor advised Yes	No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private bene	he benefit of the donor or donor advisor, or	unds can be for any other Yes	No
Par	Rui Conservation Easements. Compl			<u>'</u>
	Purpose(s) of conservation easements held by		es to 1 01111 550, 1 art 14, 11116 7.	
•	Preservation of land for public use (e.g., re	— · · · — · · · · · · · · · · · · · · ·	ion of an historically important land area	
	Protection of natural habitat	´ = 	ion of a certified historic structure	
	Preservation of open space	i iesci vat	ion of a certified historic structure	
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution	in the form of a conservation easement or	n the
	last day of the tax year		Held at the End of the Ta	x Year
	Total number of conservation easements		2a	<u> </u>
	Total acreage restricted by conservation easen	nents	2b	
	: Number of conservation easements on a certifi		2c	
	Number of conservation easements included in		 	
_	structure listed in the National Register	•	2d	
3	Number of conservation easements modified, t tax year ►	ransferred, released, extinguished, or termi	nated by the organization during the	
4	Number of states where property subject to cor	nservation easement is located 🕨		
5	Does the organization have a written policy regard enforcement of the conservation easement		handling of violations,	No
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation ea	asements during the year	
7	Amount of expenses incurred in monitoring, ins ▶\$	specting, and enforcing conservation easem	ents during the year	
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)^2$	line 2(d) above satisfy the requirements of	section Yes	No
9	in Part XIV, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements.	orts conservation easements in its revenue of the organization's financial statements that	and expense statement, and balance shee t describes the organization's accounting f	t, and or
Par	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasures wered 'Yes' to Form 990, Part IV, I	, or Other Similar Assets. ine 8.	
1a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance.	held for public exhibition, education, or res	venue statement and balance sheet works earch in furtherance of public service, pro-	of vide,
ì	o if the organization elected, as permitted under historical treasures, or other similar assets hel- following amounts relating to these items	SFAS 116 (ASC 958), to report in its reven d for public exhibition, education, or research	ue statement and balance sheet works of a th in furtherance of public service, provide	art, the
	(i) Revenues included in Form 990, Part VIII,	line 1	>\$	0.
	(ii) Assets included in Form 990, Part X		►\$ <u>445</u>	0.
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or other similar asset 16 (ASC 958) relating to these items	s for financial gain, provide the following	
ā	Revenues included in Form 990, Part VIII, line	1	► \$	
t	Assets included in Form 990, Part X		≻ \$	

Schedule D (Form 990) 2011 Yale						06-033			Page 2
Partill Organizations Maintai	ining Collecti	ons of Art, Hist	torical	Treasures, or 0	<u>Other</u>	Similar Ass	ets (d	<u>:ontını</u>	ıed)
3 Using the organization's acquisition items (check all that apply).	on, accession, an	_			it are a	significant use	of its	ollectio	n
a Public exhibition				hange programs					
b X Scholarly research		e ∐ Othe	er						
c X Preservation for future genera		no and avalous have							
4 Provide a description of the organ Part XIV5 During the year, did the organization			,	J			ın		
assets to be sold to raise funds ra	ther than to be n	naintained as part	of the o	rganization's collect	ion?	iliai	Yes	<u>:</u> [X No
Rart IV Escrow and Custodia line 9, or reported an a	Arrangemen	ts. Complete if rm 990. Part X	the o	rganization ansv 21	wered	'Yes' to For	m 99), Par	t IV,
1 a Is the organization an agent, trust			<u> </u>		ecate r	not			
included on Form 990, Part X?	·	other intermediary	101 001	ithibutions of other a	133513 1		Yes	, [No
b If 'Yes,' explain the arrangement in	n Part XIV and c	omplete the followi	ng table) ,					
							Amour	ıt	
c Beginning balance					1c				
d Additions during the year					<u>1d</u>				
e Distributions during the year					1 e				
f Ending balance					11	L			_
2a Did the organization include an ar		90, Part X, line 21?	,				Yes	L	No
b If 'Yes,' explain the arrangement i				al IVa al la Farma	000	Dark IV I Iva	10		
Part V. Endowment Funds. Co									- beet
1 - Community of year balance	(a) Current year			(c) Two years back		Three years back	(e)	Four year	rs Dack
1 a Beginning of year balance	2,153,26		_	1,098,537	· 	.,055,094.	┼	3 4	
b Contributions	-214,35	5. 800,	100.	0	+	10,100.	 	, , ,	1 1
c Net investment earnings, gains, and losses	551,86	716,	179	579,100	1	630,711.			17.
d Grants or scholarships	331,50		500.	0		3,000.	1		
e Other expenditures for facilities			300.		†	2,000.	—	(
and programs	11,76		289.	0		3,632.		<u></u>	
f Administrative expenses	519,63			542,482		590,736.		•	أ
g End of year balance .	1,959,37			1,135,155	. 1	,098,537.			
2 Provide the estimated percentage	-	ar end balance (lin	e 1g, co	olumn (a)) held as					
a Board designated or quasi-endowi									
b Permanent endowment ►		•							
c Temporarily restricted endowment									
The percentages in lines 2a, 2b, a	and 2c should equ	iai 100%							
3a Are there endowment funds not in	the possession	of the organization	that are	held and administe	ered for	the	1	Yes	T No
organization by. (i) unrelated organizations							20(1)	res	No
(ii) related organizations							3a(i) 3a(ii)		
b If 'Yes' to 3a(ii), are the related or	raanizatione lietor	l as required on So	hadula	D2		•	3b	X	\vdash
4 Describe in Part XIV the intended	-	•				•	_ 30		
Part VI Land, Buildings, and E									
Description of property		Cost or other basis		Cost or other	(c) Ac	cumulated	(d)	Book va	alue
		(investment)	(6	asis (other)		reciation	<u> </u>		
1 a Land		<u></u> -	ļ						
b Buildings		1,030,390.	4				1	<u>,030</u>	<u>,390.</u>
c Leasehold improvements	<u> </u>	·	 						
d Equipment	<u> </u>		 				-		
e Other		445,407.							<u>,407.</u>
Total. Add lines 1a through 1e. (Column	n (a) must equal	orm 990, Part X, o	column	(B), line 10(c))		Calas	_		<u>,797.</u>
BAA						Sched	uie D (i	orm 99	90) 2011

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TEEA3302 01/16/12

Schedule D (Form 990) 2011 Tale University			2975 Page 3
Part VII. Investments — Other Securities. S			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion ket value
(1) Financial derivatives		Cost of end-of-year man	tet value
(2) Closely-held equity interests			
(3) Other			
(A)			
<u>(B)</u>			
(C)			
(D)			
<u>(E)</u>			
<u></u>			
<u>(G)</u>			
<u>(H)</u> _ _			
<u> </u>			4, 5,00
Total. (Column (b) must equal Form 990 Part X, column (B) line 12)	P		
Part VIII Investments - Program Related. S			
(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion. ket value
(1)			101 10.00
(2)			
(3)			
(4)			· · · · · · · · · · · · · · · · · · ·
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	>		
Pant X Other Assets. See Form 990, Part	X, line 15.		
	Description		(b) Book value
(1) Yale University Endowment Fund	S		1,959,375.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	a (P) trac 15)	•	1 050 275
Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. See Form 990, Part X			1,959,375.
(a) Description of liability	(b) Book value		the state of the section of
(1) Federal income taxes	(b) Book value	1	
(2)		1	
(3)		4	,*, · *
(4)		1	
(5)		1	
(6)		1	
(7)		1	,
(8)		1	, , , .
(9)		1	,
(10)		1	
(11)			,
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	>		
2 FIN 49 (ASC 740) Footpote In Part VIV provide the te	ut of the feetnate to the events	-44-4	

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

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_		0332975	Page 4
Rai	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)	 	
3	Excess or (deficit) for the year Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments Donated services and use of facilities	ļ	
5	Investment expenses	 	
6 7	Prior period adjustments		
8	Other (Describe in Part XIV)	<u> </u>	
9	Total adjustments (net). Add lines 4 through 8		
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
	Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments		
	b Donated services and use of facilities 2b		
	c Recoveries of prior year grants		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	(ty)	
	a Investment expenses not included on Form 990, Part VIII, line 7b		
ı	b Other (Describe in Part XIV.)	523	
	c Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturn	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	9.0	
	a Donated services and use of facilities	Sign	
l	b Prior year adjustments 2b		
(c Other losses 2c		
(d Other (Describe in Part XIV.)		
•	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	2	
	a Investment expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV)	4.0	
	c Add lines 4a and 4b	4c	
	RAW Supplemental Information	<u> </u>	
		s 1h and 2h	
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b. Also complete this	s part to provide	
any	additional information		
Pt.	V Line 4 See Schedule O, Part V, Line 4		
٦.	TTT Tire 4		
Pt	III Line 4 The Club maintains a collection of rare books, manuscr	ipts	
	and latters from the Blinchather maried in audem to		
	and letters from the Elizabethan period in order to		
	function the americal action to account account as the		
	further the organization's exempt purpose of the		
	numerica of likewakaan farm this senied addit the		
	promotion of literature from this period within the		
	Yale University community.		
	rate university community.		

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Schedule D (Form 990) 2011	Yale University	Elizabethan Club	Corp	06-0332975	Page 5
Schedule D (Form 990) 2011 Pari XIV Supplementa	I Information (continu	ıed)			
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YALE UNIVERSITY ELIZABETHAN CLUB CORPORATION EIN 06-0332975 FORM 990 - FYE 6/30/12

Schedule D, Part V, Endowment Funds, Lines 1g and 2b:

This figure represents the book value of the endowment fund principal. In accordance with the 2012 instructions for Form 990, this figure is reported at book value. It is reported on Line 15 of Part X as "Other Assets" because this fund is entirely under control of the financial office of Yale University. The securities which make up the principal of this endowment fund cannot be sold or otherwise disposed of by the officers of the Elizabethan Club.

Sch D, page 2/Part V, line 1b col (a)

Description	Amount
Adjustments to opening balances	-214,355.
Total	-214,355.

Supporting Statement of:

Sch D, page 2/Part V, line 1b col (b)

Description	Amount
Contributions from public	100.
Transfer from Operating Account	800,000.
Total	800,100.

Supporting Statement of:

Sch D, page 2/Part V, line 1e col (a)

Description	Amount
Expenses paid directly from funds	10,932.
Rare book purchase directly from funds	835.
Total	11.767.

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

OMB No 1545-0047

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201

Employer identification number

06-0332975

≗ □

X Yes

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.
Attatch to Form 990. Yale University Elizabethan Club Corp Name of the organization

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part I | Grants and Other Assistance to Governments and Organizations in the United States. Complete of the organization answered 'Yes' to

Part II can be duplicated if additional space is needed	f additional space	ıs needed					▲
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) New Haven Reads	76-0807330		10,000.	0.0	0. Cash	N/A	Gen'l support
(2) Intl_Festival_of Arts	06-1444222		10,000.	0.0	Cash	N/A	Gen'l support
(3)							
(4)							
(5)							
(6)							
Ω							
(8)							
2 Enter total number of section 501(c)(3) and government organizations	3) and government org	_	isted in the line 1 table			•	

Schedule I (Form 990) (2011)

TEEA3901 06/01/11

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

3 Enter total number of other organizations listed in the line 1 table

Page 2 Schedule I (Form 990) (2011) Yale University Elizabethan Club Corp

| Partill | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.
| Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 David Currell: Essay Prize	1	1,000.	0.	Cash	N/A
2 \$100 essay prize (2011)	4	400.	0.	Cash	N/A
3 \$100 essay prize (2012)	4	400.	0.	Cash	N/A
4 Book prizes (2011)	4	64.	64.	FMV	Books
5 Book prizes (2012)	7	124.	124.	FMV	Books
9					
7		-			
Randwa Supplemental Information. Complete this part to provide the information required in Part I, line	lete this part to pr	ovide the informati	on required in Par	t I, line 2, and any other	er additional information.
Pt_I_Line_2The_Elizabethan	in Club follows	s all procedures	es_as_establis	established by Yale	
Pt_I Line 2 University for monitoring t	. monitoring t	the use of grant	grant funds in the	<u>U.S.</u>	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	1 1 1 1 1 1 1 1 1 1	 	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	 	 	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

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Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2011 offer of rego linepection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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.

Yale University E	Elizabethan Club Corp	06-0332975
Pt_VI_ Line 12c_	Yale University provides written policies on al	l_of_the
Pt_VI,_Line_15	subjects contained in line 12 through 15 and th	e
	Elizabethan Club follows these policies.	
Pt_VI,_Line_11a_	Form 990 is reviewed by the Chair of the Board	o <u>f</u>
	Directors and staff prior to filing. After fil	ing it
	is reviewed by the entire Board of Directors an	d
	Officers.	
Pt III, Lns 1 & 4	a Form 990, Part III, Line 1 and 4a:	
	See statement attached.	
Pt_VI-C, Line 19	The Elizabethan Club will respond to written re	quests_for
	information about the coporation such as govern	ing
	documents, conflict of interest policies and fig	nancial
	statements.	
Pt_XI,_Line_2c	Form 990, Part XI, Financial Statements and Rep	orting:
	The Elizabethan Club's financial statements are	audited
	as part of the audit of Yale University's finan	cial
	statements.	
Sched A, Ln_11f_	Form 990, Schedule A, Line 11f:	
	See attached copy of IRS Classification Letter	dated
	_May_12,_2008	
Sched D, Pt XIV	Form 990, Schedule D, Endowment Funds, Line 4:	
	See statement attached.	

Schedule O (Form 990 or 990-EZ) 2011	Page 2
Name of the organization Yale University Elizabethan Club Corp	Employer identification number 06-0332975
Pt XI, Line 5 Due to a change in accounting systems, the endi	ing halances
of four of the Elizabethan Club's endowment fur	nds_were
overstated on the prior year's Form 990 (FYE 6/	/30/11) as follows:
Maynard Mack Fund -196,110.	
Elizabethan Club 1911100.	
Ellsworth Fund +9.	
Troxell Fund -18,154.	
=======	
Total:214,355.	

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Schedule O' (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Honoraria Purchase of rare books	8,865. 1,319.	8,865. 1,319.	0.	0.
Food and beverages	107,334.	107,334.	0.	0.

YALE UNIVERSITY ELIZABETHAN CLUB CORPORATION EIN 06-0332975 FORM 990 - FYE 6/30/12

Part III, Line 1 and Line 4a

The Yale University Elizabethan Club Corporation is an organization operated solely for the benefit of and in connection with Yale University, an organization described in Section 170(b)(1)(A)(11) of the Internal Revenue Code of 1954 as amended.

The Corporation was formed in 1911, and its purposes include the promotion among its membership and in the Yale community of a larger appreciation of literature. Membership is drawn almost entirely from the Yale community, and includes faculty, students and alumni who are interested in the serious discussion of literature. Distinguished scholars and authors from outside the Yale community are sometimes elected to honorary membership.

The principal assets in which the Corporation has an interest are its building, located at 459 College Street, on the Yale campus in New Haven, which houses the library and serves as a meeting place for conversations and discussions relating to literary topics; its endowment fund, which is held by Yale University in trust for the Corporation; and its library, containing a number of very valuable books and pamphlets known as "The Elizabethan Club Collection", ownership of which is vested in Yale University and is deposited in the Corporation's building and held for use by scholars and others in the Yale community. A separate fund is held by the Yale University Press, for publications of a scholarly nature under the direction of the Corporation.

The Articles of Association provide that the Corporation may, upon the affirmative vote of two-thirds of its members, convey all of its property to Yale University: further provide that if the Corporation shall be dissolved or its corporate existence be terminated, all of its property shall immediately vest free and clear of any trust in Yale University; further provide that the Corporation may not sell, convey or encumber any of its property without the consent of Yale University; and further provide that the Articles of Association may not be amended without the consent of Yale University.

Form 990 p 11/Line 29, column (A)

Description	Amount
Endowment funds	2,153,265.
Club house	1,030,390.
Rare book collection	444,089.
Inventory for resale	2,580.
Total	3,630,324.

Supporting Statement of:

Form 990 p 11/Line 29, column (B)

Description	Amount
Endowment funds	1,959,375.
Club house	1,030,390.
Rare book collection	445,407.
Inventory for resale	1,764.
Total	3,436,936.

Form 990 p 10/Line 16 col (B)

Description	Amount
Utilities	10,760.
Taxes: real and personal property	18,257.
Total	29,017.

Supporting Statement of:

Form 990 p 11/Line 29, column (B)

Description	Amount
Endowment funds	1,959,375.
Club house	1,030,390.
Rare book collection	445,407.
Inventory for resale	1,764.
Total	3,436,936.

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Form 990 p 10/Line 11b col (B)

Description	Amount
Davis O'Sullivan & Priest LLC	
Legal and tax preparation fees	3,257.
Cooper Whitney Cochran & Francois	
Legal fees	9,000.
Total	12,257.

Supporting Statement of:

Form 990 p 10/Line 11g col (B)

Description	Amount
Other professional fees CT State registration fee	6,359. 50.
Total	6,409.

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
Printing & publications	42,350
Postage & shipping	10,423.
Bank service charges	80
Total	52,853

Supporting Statement of:

Form 990 p 10/Line 14 col (B)

Description	Amount
Equipment rental and maintenance	2,379.
Maynard Mack Fd ITS	1,063.
Total	3,442.

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Yale University Elizabethan Club Corp

Related Organizations and Unrelated Partnerships

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

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OMB No 1545-0047

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Openito Public Inspection

Employer identification number

06-0332975

(g) Sec 512(b)(13) controlled entity? Schedule R (Form 990) 2011 ٥ N (f) Direct controlling Part II Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had Yes (f) Direct controlling entity (e) End-of-year assets 509(a) (3) Type 1 N/A (e)
Public charity status (if section 501(c)(3)) Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (d) Total income (d) Exempt Code section 501(c)(3) (c)
Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) (b) Primary activity one or more related tax-exempt organizations during the tax year.) CJ (b)
Primary activity Educational BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Purposes (a) Name, address, and EIN of disregarded entity 1111 (a) Name, address, and EIN of related organization 1111 1 ١ 1 I 1 E Ø ଫ୍ର 1 1 ල €, 8

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Schedule R (Form 990) 2011 Yale University Elizabethan Club Corp

Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related organizations treated as a partnership during the tax year.) Pent III

Schedule R (Form 990) 2011 (k) Percentage ownership (h) Percentage ownership | Partival Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) © General or managing partner? Ŷ (g) Share of end-of-year assets Yes Code V-UBI amount in box 20 of Schedule F-(Form 1065) Share of total income (h)
Disproportionate
allocations? å Yes Type of entity (C corp, S corp, or trust) (g) Share of end-of-year assets Direct controlling entity (f) Share of total income ਉ TEEA5002 05/24/11 (c)
Legal domicile
(state or foreign country) (e)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (b) Primary activity (d) Direct controlling entity (c) Legal domicile (state or foreign country) (a) Name, address, and EIN of related organization (b)
Primary activity Name, address, and EIN of related organization 1 1 BAA 8 5 Ø ල 5 ଫୁ

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Park Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II III or IV of this schedule			200
	d organizations listed in Parts II-I	۸,	ON SEL
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a X
b Gift, grant, or capital contribution to related organization(s)			1 b
c Gift, grant, or capital contribution from related organization(s)			10
d Loans or loan guarantees to or for related organization(s)			N Pl
e Loans or loan guarantees by related organization(s)			
f Sale of assets to related organization(s)			
g Purchase of assets from related organization(s)			1a X
h Exchange of assets with related organization(s)			
i Lease of facilities, equipment, or other assets to related organization(s)			li x
j Lease of facilities, equipment, or other assets from related organization(s)			1j X
k Performance of services or membership or fundraising solicitations for related organization(s)			1k X
1 Performance of services or membership or fundraising solicitations by related organization(s)			1 X
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1m X
n Sharing of paid employees with related organization(s)			
 Reimbursement paid to related organization(s) for expenses 			10 X
p Reimbursement paid by related organization(s) for expenses			
q Other transfer of cash or property to related organization(s)			1q X
L١			1r X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	e, including covered relationships	s and transaction thresho	lds.
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(2)			
(3)			
(b)			
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Parivin Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

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

(a) (b) (c) (d) (e) (f)	(9)	(3)	(b)	e	W	(6)	3	6		-	. 3
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant ncome (related, unre-	Are all partners section 501(c)(3)	ners Share of total income	Share of end-of-year assets	Dispropor- tionate allocations?	Code V-UBI amount in box 20 of Schedule	Gen		Percentage ownership
			lated, excluded from tax under	organizatio	us?			K-1 Form (1065)			
			section 512-514)	Yes	No		Yes No	(2000)	Yes	°Z	
(1)										_	
											
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Part VIII Supplementa	al Information		
Complete this (see instruction	s part to provide additional information for responses to q ons).	uestions on Schedule R	
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