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 $_{\text{Form}}990$

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

Open to Public

| Albany, NY 122083494 I Tax-exempt status Albany LAW SCHOOL Albany LAW SCHOOL Albany LAW SCHOOL Albany LAW SCHOOL 14-1338309 E Telephone nur (518) 445-2 G Gross receipts \$ I tarelephone nur (518) 445-2 G Gross receipts \$ I tarelephone nur (518) 445-2 I tarelephone nur (| timber 2 3 9 1 \$ 42,905,665 The Yes No ed? Yes No (see instructions) mber I State of legal domicile I onts, faculty, alumni, storic ties to the state of critical analysis, appreciation of the contractions of the cont |
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| Number and street (or P O box if mail is not delivered to street address) 80 New Scotland Avenue City or town, state or country, and ZIP + 4 Albany, NY 122083494 F Name and address of principal officer Penelope Andrews 80 New Scotland Avenue Albany, NY 122083494 H(b) Are all affiliates? H(c) Group exemption num Website: ▶ www albanylaw edu Form of organization ▼ Corporation ▼ Trust ▼ Association ▼ Other ▶ | s 42,905,665 for Yes No ed? Yes No (see instructions) mber - I State of legal domicile I nts, faculty, alumni, storic ties to the state of the state of the state of critical analysis, appreciation of the Law School strives |
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| 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 | 3 3 53 |
| 6 Total number of volunteers (estimate if necessary) | 40 |
| 7a Total unrelated business revenue from Part VIII, column (C), line 12 | |
| b Net unrelated business taxable income from Form 990-T, line 34 | |
| 8 Contributions and grants (Part VIII, line 1h) | Current Year 4,125,26 |
| | 28,828,95 |
| 9 Program service revenue (Part VIII, line 2g) | 1,484,15 |
| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 376,254 | 299,61 |
| Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line | 24 727 00 |
| 12) | 34,737,99 5,283,88 |
| 14 Benefits paid to or for members (Part IX, column (A), line 4) | 3,203,00 |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines | |
| 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) | 16,240,07 |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) | 15,08 |
| | |
| 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 9,751,60 |
| 18Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)31,200,62319Revenue less expenses Subtract line 18 from line 12 | 31,290,64 |
| | 3,447,34 |
| Year | End of Year |
| 20 Total assets (Part X, line 16) | 90,461,83 |
| 21 Total liabilities (Part X, line 26) | 24,136,27 |
| | 66,325,56 |
| <u> </u> | 24,136,2 |

| Form | 990 (2011) | | | | Page 2 |
|-------|--|-------------------|---|---|-----------------------------------|
| Par | | | ce Accomplishments onse to any question in this | Part III | |
| 1 | Briefly describe the organizat | ion's mission | | | |
| focus | | | | provides instructional and educates in the awarding of one of three | |
| | | | | | |
| 2 | Did the organization undertake the prior Form 990 or 990-EZ | | | the year which were not listed on | ┌ Yes ┌ No |
| | If "Yes," describe these new s | ervices on Scl | nedule O | | |
| 3 | Did the organization cease co services? | | | ow it conducts, any program | ⊤Yes ▼ No |
| 4 | | | | | |
| 4 | expenses Section 501(c)(3) | and 501(c)(4) | organizations and section 4 | of its three largest program serving 1947 (a) (1) trusts are required to for each program service reports | report the amount of |
| 4a | (Code) (Ex | penses \$ | 25,202,064 including grants | of \$ 5,283,882) (Revenue | \$ 28,669,347) |
| | Higher Education Albany Law Scho students | ol has an enrollm | ent of 670 FTEs and full time facu | lty of 55 In the current fiscal year 243 d | egrees were awarded to JD and LLM |
| 4b | (Code) (Ex | penses \$ | ıncludıng grants | of \$) (Revenue \$ |) |
| | | | | | |
| | | | | | |
| 4c | (Code) (Ex | penses \$ | ıncludıng grants | of \$) (Revenue \$ |) |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 4d | Other program services (De | scribe in Sche | dule O) | | |
| | (Expenses \$ | | uding grants of \$ | 0)(Revenue\$ | 0) |
| 4e | Total program service expens | es - \$ | 25,202,064 | | |

| art IV | Check | dist of | Required | Schedules |
|--------|-------|---------|----------|-----------|
| | | | | |

| | | | Yes | No |
|-----|---|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 | 2 | Yes | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | No |
| 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 | Yes | |
| 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 | | No |
| 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 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | | Νo |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | No |
| 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 | | No |
| 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 $\sqrt{2}$ | 10 | Yes | |
| 11 | If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI. | 11a | Yes | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. | 11b | | No |
| 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. | 11c | | No |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. | 11d | Yes | |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. | 11e | Yes | |
| 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 | Yes | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12a | Yes | |
| 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 | | No |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | Yes | |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Νo |
| 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, Part I | 14b | | No |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV. | 15 | | No |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV | 16 | | No |
| 17 | Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | Yes | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | No |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | No |
| 20a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20a | | No |
| b | If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements | 20b | | |

| Par | t IV Checklist of Required Schedules (continued) | | | |
|-----|---|-----|----------------|--------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | No |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | Yes | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25 | 24a | Yes | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | Νo |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | No |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | No |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | No |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | _ |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | No |
| С | 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 owner? If "Yes," complete Schedule L, Part IV | 28c | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma | 29 | Yes | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I | 33 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | No |
| 35a | Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)? | 35a | | No |
| 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 | | No |
| 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 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |
| | | F | orm 990 | (2011) |

| • | <u>'</u> |
|--------|---|
| Part V | Statements Regarding Other IRS Filings and Tax Compliance |

| | Check if Schedule O contains a response to any question in this Part V | • | ٠١ | |
|-----|--|-----|-----|----|
| | | | Yes | No |
| .a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | | | |
| | | | | |
| 1. | Enter the number of Forms W. 2C included in line 1s. Enter C if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| с | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | |
| 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 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Yes | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| la | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | | Νo |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | | |
| la | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)? | 4a | | No |
| 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 | | | |
| ia | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Νο |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | No |
| | | 5b | | |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? | 6a | Yes | _ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | Yes | |
| 1 | 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 and services provided to the payor? | 7a | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 70 | | |
| | | 1 | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| | 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, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 1 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. DId | | | |
| | the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | |
| 1 | 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 | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| 1 | Section 501(c)(12) organizations. Enter | | | |
| | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against 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 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the | | | |
| - | year | | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue | | | |
| | qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state | 13a | | _ |
| b | Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | |
| С | Enter the aggregate amount of reserves on hand 13c | | | |
| .4a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Νo |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |
| | | | | |

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

| Se | ection A. Governing Body and Management | | | | | | | |
|-----|--|-----|-----|----|--|--|--|--|
| | | | Yes | No | | | | |
| | | | | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | | | | | |
| b | / | | | | | | | |
| 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 | | No | | | | |
| 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 | | No | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | No | | | | |
| 6 | Did the organization have members or stockholders? | 6 | | No | | | | |
| 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 | | No | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | No | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | | | | | |
| а | The governing body? | 8a | Yes | | | | | |
| ь | Each committee with authority to act on behalf of the governing body? | 8b | Yes | | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No | | | | |
| | ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.) | | | | | | | |
| | | | Yes | No | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | No | | | | |
| 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? | 10b | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | | No | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review the Form 990 | | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | | | | | |
| b | Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes | | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | Yes | | | | | |
| b | Other officers or key employees of the organization | 15b | | No | | | | |
| | If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No | | | | |
| 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 take steps to safeguard the organization's exempt status with respect to such arrangements? | | | | | | | |
| | ection C. Disclosure | 16b | | | | | | |
| | · · | | | | | | | |

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► Victor E Rauscher

80 New Scotland Ave Albany, NY 122083494 (518) 445-3294

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, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

| Check this box if neither the or | ganization nor any re | lated o | rgan | ızatı | ons | compe | ensat | ted any current or fo | rmer officer, direc | tor, or trustee |
|----------------------------------|--|--|-----------------------|----------|--------------|------------------------------|--------|--|--|--------------------------|
| (A) Name and Title | (B) A verage hours per week (describe | more than one box, compensation counters person is both from the an officer and a organization (W- organization the organization from the organization fro | | | | | | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and | |
| | hours for related organizations in Schedule O) | Individual trustae or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | , | related organizations |
| See Additional Data Table | | | | | | | | | | |
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PO 849084 Boston, MA 02284

Isaacson Miller 263 Summer St Boston, MA 02210

\$100,000 of compensation from the organization \blacktriangleright 7

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| | (A) Name and Title | (B) A verage hours per week (describe | unles an | on (d e tha | n on son er a | e bo ıs b nd a | x, oth) | | Rep comp fro organi: | (D) ortable ensation m the zation (W- | (E) Reportable compensatior from related organizations (W- 2/1099- | | (F) Estima amount o compens from to | ated f other sation the ion and |
|--|---|--|-----------------------------------|-----------------------|---------------------|----------------------|------------------------------|-----------|-------------------------------|---------------------------------------|--|-----|---------------------------------------|---|
| | | hours for related organizations in Schedule O) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | | | MISC) | | organiza | |
| See A | Additional Data Table | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | + | | |
| 1b | Sub-Total | | | | <u> </u> | ٠. | | <u> </u> | <u> </u> | | | | | |
| С | Total from continuation sheets | to Part VII, Sec | tion A | | | | | F | | | | | | |
| d | Total (add lines 1b and 1c) . | | | | | | | <u> </u> | | 1,729,480 | | 0 | | 296,916 |
| 2 | Total number of individuals (incl \$100,000 of reportable compen | | | | | | apove |) Wn | o receive | ea more tha | ın | | | |
| | | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci | | | | ee, k | ey e | mploy | ee, d | or highes | t compens | ated employee | ı | | 1 |
| 4 | For any individual listed on line | | | | com | nens | • sation | • and | other co | mpensatio | · · · | 3 | Yes | |
| | organization and related organiz | | | | | | | | | | | ء ا | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| 5 | Did any person listed on line 1a | receive or accru | ue com | • oensa | • atıon | • fror | n any | • unre | lated org | anızatıon o | or individual for | 4 | Yes | |
| | services rendered to the organiz | zation? <i>If</i> "Yes," | complet | e Sch | edul | e J f | or suci | h per | son . | | • | 5 | | No |
| Se | ection B. Independent Con | tractors | | | | | | | | | | | | |
| 1 | Complete this table for your five \$100,000 of compensation from or within the organization's tax y | n the organizatio | | | | | | | | | | | | |
| | Nar | (A) me and business ad | dress | | | | | | | Desc | (B) ription of services | | (C Comper | |
| 84 H | ersity Heights Association Illand Avenue y, NY 12208 | | | | | | | | | Security | | | | 336,605 |
| Janıtı 1988 | onics Central Ave | | | | | | | | | Custodial se | rvices | | | 338,163 |
| Comp 2165 | outer Professionals International Technology Dr nectady, NY 12308 | | | | | | | | | Information | Technology | | | 174,263 |
| 1988 Alban Comp 2165 Scher | Central Ave y, NY 12212 outer Professionals International Technology Dr | | | | | | | | | | | | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than

142,890

111,218

Phone system

Search consultants

| Form 99 | | | f Davis and | | | | | Page 9 |
|--|----------|---|---|---------------------------------------|----------------------|--|---|---|
| | | Statement o | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512,513,or 514 |
| nts nts | 1a | Federated cam | | | | | | |
| E D | b | Membership du | es 1b | 0 | | | | |
| ું ≣ | C | Fundraising eve | ents 1c | 0 | | | | |
| ≣ੁ≅ | d | Related organiz | rations 1d | | | | | |
| ĘĘ. | e | Government grants | s (contributions) 1e | 1,715,883 | | | | |
| Contributions, gifts, grants and other similar amounts | f g | sımılar amounts no | butions included in | 2,409,384 | | | | |
| S ၕ | h | Total. Add lines | s 1a-1f | ▶ | 4,125,267 | | | |
| <u> </u> | | | | Business Code | | | | |
| en Te | 2a | Tuition and Fees | | 900099 | 28,669,347 | 28,669,347 | 0 | 0 |
| æ | b | Income on student | t loans | 900099 | 132,015 | 132,015 | 0 | 0 |
| <u>9</u> | c | Bookstore | | 451211 | 27,594 | 27,594 | 0 | 0 |
| Program Service Revenue | d | | | | | | | |
| 3 | e | | | | | | | |
| <u> </u> | f | All other progra | am service revenue | | 0 | 0 | 0 | 0 |
| <u>&</u> | g | Total. Add lines | s 2a – 2f | | 28,828,956 | | | |
| | 3 | | ome (including dividen | | 20,020,300 | | | |
| | | | aramounts) | · · · · · · · · · · · · · · · · · · · | 1,163,765 | 1,163,765 | 0 | 0 |
| | 4 | Income from inves | stment of tax-exempt bond | proceeds 🕒 🕨 | 0 | 0 | 0 | 0 |
| | 5 | Royalties | <u> </u> | • | 12,646 | 12,646 | 0 | 0 |
| | | | (ı) Real | (II) Personal | | | | |
| | 6a | Gross rents | | | | | | |
| | b | Less rental expenses | | | | | | |
| | c | Rental income or (loss) | 0 | 0 | | | | |
| | d | | me or (loss) | | | | | |
| | | | (ı) Securities | (II) O ther | | | | |
| | 7a | Gross amount from sales of | 8,488,067 | 0 | | | | |
| | | assets other than inventory | | | | | | |
| | Ь | Less cost or | 8,167,675 | 0 | | | | |
| | | other basis and sales expenses | | | | | | |
| | c | Gain or (loss) | 320,392 | 0 | | | | |
| | d | Net gain or (los | ss) | | 320,392 | 320,392 | 0 | 0 |
| une | 8a | Gross income for events (not income) \$ | luding 0 | | | | | |
| Other Revenue | | of contributions See Part IV, lin | reported on line 1c) ne 18 a | | | | | |
| the | ь | | penses b | | | | | |
| Õ | С | | (loss) from fundraising | events 🕨 🗍 | | | | |
| | 9a | Gross income f See Part IV, lin | rom gaming activities | | | | | |
| | | See r dre iv, iiii | a | | | | | |
| | ь | Less direct ex | penses b | | | | | |
| | С | Net income or (| (loss) from gamıng actı | vities | | | | |
| | 10a | Gross sales of returns and allo | owances . | | | | | |
| | b c | | a oods sold b (loss) from sales of invo | entory 🏲 | | | | |
| | <u> </u> | Miscellaneous | | Business Code | | | | |
| | 11a | | | | | | | |
| | ь | | | | | | | |
| | c | | | | | | | |
| | d | All other reveni | ue | | 286,964 | 286,964 | 0 | 0 |
| | e | Total. Add lines | | | 286,964 | · | | |
| | 12 | Total revenue. | See Instructions . | ▶↑ | 34,737,990 | 30,612,723 | 0 | |
| | | | | | 37,137,370 | 50,012,725 | | Form 990 (2011) |

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 no | ot include amounts reported on lines 6b, o, 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 | 0 | 0 | | |
| 2 | Grants and other assistance to individuals in the United States See Part IV, line 22 | 5,283,882 | 5,283,882 | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 | 0 | 0 | | |
| 4 | Benefits paid to or for members | 0 | 0 | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 744,831 | 168,000 | 427,481 | 149,350 |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | 0 | 0 | 0 | 0 |
| 7 | Other salaries and wages | 12,034,270 | 9,836,236 | 1,764,536 | 433,498 |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 1,114,843 | 857,752 | 218,310 | 38,781 |
| 9 | Other employee benefits | 1,498,925 | 1,153,261 | 293,522 | 52,142 |
| 10 | Payroll taxes | 847,206 | 651,834 | 165,901 | 29,471 |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | 0 | 0 | 0 | 0 |
| b | Legal | 149,512 | 0 | 149,512 | 0 |
| c | Accounting | 83,657 | 0 | 83,657 | 0 |
| d | Lobbying | 0 | 0 | 0 | 0 |
| е | Professional fundraising See Part IV, line 17 | 15,088 | | | 15,088 |
| f | Investment management fees | 161,219 | 0 | 161,219 | 0 |
| g | Other | 644,280 | 326,949 | 261,455 | 55,876 |
| 12 | Advertising and promotion | 61,241 | 12 | 61,229 | 0 |
| 13 | Office expenses | 258,944 | 137,327 | 105,556 | 16,061 |
| 14 | Information technology | 252,657 | 0 | 252,657 | 0 |
| 15 | Royalties | 0 | 0 | 0 | 0 |
| 16 | Occupancy | 1,487,147 | 1,278,926 | 159,168 | 49,053 |
| 17 | Travel | 465,917 | 227,991 | 190,971 | 46,955 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | 0 | 0 | 0 |
| 19 | Conferences, conventions, and meetings | 326,933 | 131,421 | 5,168 | 190,344 |
| 20 | Interest | 864,021 | 803,540 | 43,201 | 17,280 |
| 21 | Payments to affiliates | 0 | 0 | 0 | 0 |
| 22 | Depreciation, depletion, and amortization | 1,512,019 | 1,406,178 | 75,601 | 30,240 |
| 23 | Insurance | 99,804 | 94,327 | 3,912 | 1,565 |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) | | | | |
| а | Library | 1,979,176 | 1,979,176 | 0 | 0 |
| b | Student Services | 248,671 | 248,671 | 0 | 0 |
| c | Research grants | 270,000 | 270,000 | 0 | 0 |
| d | Printing | 229,844 | 86,100 | 129,705 | 14,039 |
| e | - | | | | |
| f | All other expenses | 656,560 | 260,481 | 358,684 | 37,395 |
| 25 | Total functional expenses. Add lines 1 through 24f | 31,290,647 | 25,202,064 | 4,911,445 | 1,177,138 |
| 26 | Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | rm 990 /2011) |

Part X **Balance Sheet** (A) (B) Beginning of year End of year 783,973 Cash—non-interest-bearing 1,636,146 1 1 3.684.756 5.049.726 2 2 3 137,545 77,362 3 760.374 4 573.916 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 3,310,649 2,768,300 7 ٥ 8 134,507 9 9 296.586 Prepaid expenses and deferred charges 10a 49,012,671 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 25,653,381 24,010,334 b Less accumulated depreciation 10c 23,359,290 45,687,824 47,899,668 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 14 0 14 Intangible assets 9,547,670 15 8,800,843 15 88,057,632 90,461,837 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 3,317,564 4,370,155 17 17 Accounts payable and accrued expenses . 18 18 0 19 331,035 19 171,716 20 17.573.531 20 17.062.436 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 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 2,531,968 25 2,531,968 D 26 23,754,098 26 24,136,275 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 40,888,375 43,073,839 Unrestricted net assets 4,511,643 28 4,137,779 28 Temporarily restricted net assets Fund 29 18,903,516 29 19,113,944 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 64.303.534 33 66.325.562 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 88.057.632 34 90.461.837

| 14:1 | Check if Schedule O contains a response to any question in this Part XI | • | | . [고 | |
|------|--|---------|----|------|---------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 34,7 | 37,990 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 31,2 | 90,647 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 3,4 | 47,343 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 64,3 | 803,534 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | -1,4 | 25,315 |
| 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 | | 66,3 | 325,562 |
| Par | TXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII | | · | ୮ | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | No |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| C | If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | | 2c | Yes | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both | ssued | | | |
| | ▼ Separate basis | | | | |
| За | 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? | е | 3a | Yes | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | equired | 3b | Yes | |

Software ID: 11000129 **Software Version:** v1.00

EIN: 14-1338309

Name: ALBANY LAW SCHOOL

Form 990, Special Condition Description:

Special Condition Description

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

| (A) Name and Title | (B) Average | (C) Position (check all | | | | | | (D) Reportable | (E) Reportable | (F) Estimated |
|---------------------------------------|----------------------|-------------------------|----------------------------|-------|----|------------------------------|--------|--|---|--|
| Traine and Traine | hours per week | | that Institutional Trustee | apply | /) | Highest compensated employee | Former | compensation from the organization (W- 2/1099-MISC) | compensation from related organizations (W- 2/1099- MISC) | amount of other compensation from the organization and related organizations |
| Johnna G Torsone Trustee | 0 | x | | | | | | 0 | 0 | 0 |
| E Stewart Jones Jr Trustee | 0 | × | | | | | | 0 | 0 | 0 |
| Erik E Joh Trustee | 0 | х | | | | | | 0 | 0 | 0 |
| Mary Ann Cody | 0 | X | | | | | | 0 | 0 | 0 |
| Trustee-Chair William A Brewer III | 0 | | | | | | | 0 | 0 | 0 |
| Trustee J K Hage III | | | | | | | | 0 | 0 | 0 |
| Trustee Peter C Kopff | 0 | | | | | | | U | | |
| Trustee | 0 | × | | | | | | 0 | 0 | 0 |
| Harry L Robinson Trustee | 0 | X | | | | | | 0 | 0 | 0 |
| James E Kelly Trustee | 0 | × | | | | | | 0 | 0 | 0 |
| Robert C Miller Trustee-Vice Chair | 0 | × | | | | | | 0 | 0 | 0 |
| Rory J Radding Trustee | 0 | х | | | | | | 0 | 0 | 0 |
| John L Sampson Trustee | 0 | х | | | | | | 0 | 0 | 0 |
| Eugene M Sneeringer Jr Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| Robert B Stiles Trustee | 0 | × | | | | | | 0 | 0 | 0 |
| Dale M Thuillez Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| Randolph F Treece Trustee | 0 | х | | | | | | 0 | 0 | 0 |
| Donna E Wardlaw Trustee-Secretary | 0 | Х | | | | | | 0 | 0 | 0 |
| Constance M Boland Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| James N Benedict Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| Keiki Michael Cabanos Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| John J Halloran Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| Leslie D Kelmachter Trustee | 0 | х | | | | | | 0 | 0 | 0 |
| Frank L Fernandez Trustee | 0 | Х | | | | | | 0 | 0 | 0 |
| Barbara D Cottrell Trustee | 8 | х | | | | | | 8,000 | 0 | 0 |
| Thomas J Mullin Trustee | О | х | | | | | | 0 | 0 | 0 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493044007163

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

ALBANY LAW SCHOOL

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

Public Charity Status and Public Support

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

Inspection **Employer identification number**

| | | | | | | | | | 14-13383 | | |
|--|-------------------------------|--------------|-----------------------------|---|--|--------------------------|--|----------------------|--|-----------------------|---------------------------------|
| | rt I | | | blic Charity Sta | | | | | | structions | |
| | rganı | | | te foundation becaus | | | | |) x | | |
| 1 | <u> </u> | | • | ion of churches, or a | | | |)(1)(A)(i). | | | |
| 2 | <u> </u> | | | in section 170(b)(1 | | | | | | | |
| 3 | | A hosp | ital or a cod | perative hospital se | rvice organiz | zatıon descri | bed in sectio | n 170(b)(1) | (A)(iii). | | |
| 4 | Γ | | | h organızatıon opera ity, and state | ted in conjun | ction with a | hospital desc | cribed in sec | tion 170(b)(| 1)(A)(iii). E | nter the |
| 5 | Γ | An orga | anızatıon op | erated for the benefi | t of a college | or universit | ty owned or o | perated by a | government | al unit desc | rıbed ın |
| | | sect ion | 170(b)(1)(| (A)(iv). (Complete P | art II) | | | | | | |
| 6 | | A feder | al, state, or | local government o | government | tal unit desc | rıbed ın secti | on 170(b)(1 |)(A)(v). | | |
| 7 | Γ | describ | oed in | at normally receives (A)(vi) (Complete P | | al part of its | support from | a governme | ntal unit or fi | om the gene | eral public |
| 8 | \sqcap | | | described in sect io r | | A)(vi) (Con | nplete Part II |) | | | |
| 9 | | | | at normally receives | | | | | outions, mem | bership fees | , and gross |
| | • | | | rities related to its e | | | | | | | |
| | | • | | oss investment inco | • | - | | | | | |
| | | | | ganızatıon after June | | | | | | , | |
| 10 | \vdash | | | ganized and operated | | | | | | | |
| 11 | <u>'</u> | | | | | | | | | o carry out t | he nurnoses of |
| An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the p one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III | | | | | | | | | | | |
| е | Γ | other t | _ | ox, I certify that the ion managers and ot | _ | | - | | | • | |
| f | | If the o | | received a written d | etermination | from the IR | S that it is a | Туре I, Туре | e II or Type l | II supportir | ng organization, |
| g | | | August 17, 2 ng persons? | 2006, has the organ | ızatıon accep | oted any gift | or contributi | on from any | of the | | |
| | | (i) a pe | erson who di | rectly or indirectly c | ontrols, eith | er alone or t | ogether with | persons des | cribed in (ii) | | Yes No |
| | | and (111 |) below, the | governing body of th | ie the suppoi | rted organıza | ation? | | | 11g | (i) |
| | | (ii) a fa | mily memb | er of a person descrı | bed in (i) abo | ove? | | | | 11g(| (ii) |
| | | (iii) a 3 | 35% contro | lled entity of a perso | n described i | ın (ı) or (ıı) a | bove? | | | 11g(| iii) |
| h | | Provide | the follow | ng information about | the support | ed organizati | ion(s) | | | | |
| S | (i) Name suppo ganız | e of rted | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see | (iv) Is the organizati col (i) list your gove docume | on in ted in rning | (v) Did you not organizati col (i) of suppor | on in your | (vi) Is the organizat col (i) org in the U | e Ion In anized | (vii) A mount of support? |
| | | | | instructions)) | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | 1 | | |
| | | | | | | | | | | | |
| | | | | | | | | | 1 | | |
| Total | 1 | | | | | | | | | | |
| | · | | L | l . | | I . | I | L | 1 | 1 | 1 |

instructions

| Sch | edule A (Form 990 or 99 | 90-EZ)2011 | | | | | | Page 2 |
|--------|---|------------------|-------------------------|---------------------|------------------------|---|---------------------|--------------------|
| | (Complet | e only if you | checked the | box on line 5, | 7, or 8 of Part | (b)(1)(A)(iv) I or if the orgar | nızatıon faıle | d to qualify |
| | | | <u>organızatıon f</u> | fails to qualify ι | <u>under the tests</u> | listed below, pl | <u>lease comple</u> | ete Part III.) |
| | ection A. Public Su | | | | | Т | 1 | |
| Cal | endar year (or fiscal ye in) | ar beginning | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contribut | ions, and | | | | | | |
| | membership fees recei | | | | | | | |
| | ınclude any "unusual | | | | | | | |
| _ | grants ") Tax revenues levied fo | rtho | | | | | | |
| 2 | organization's benefit a | | | | | | | |
| | paid to or expended on | | | | | | | |
| | behalf | | | | | | | |
| 3 | The value of services of | | | | | | | |
| | furnished by a governme the organization withou | | | | | | | |
| 4 | Total. Add lines 1 thro | _ | | | | | | |
| 5 | The portion of total cor | - | | | | | | |
| - | by each person (other | than a | | | | | | |
| | governmental unit or p | • | | | | | | |
| | supported organization line 1 that exceeds 2% | | | | | | | |
| | amount shown on line 1 | | | | | | | |
| | (f) | 21,0014 | | | | | | |
| 6 | Public Support. Subtractine 4 | ct line 5 from | | | | | | |
| S | ection B. Total Sup | port | | | | | | |
| Cal | endar year (or fiscal yea | r beginning | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| _ | ın) | _ | (4) 2007 | (2) 2000 | (4) 2005 | (4) 2020 | (0) 2022 | (1) 1 3 4 4 |
| 7 8 | A mounts from line 4 Gross income from inte | rost – | | | | | | |
| 0 | dividends, payments re | | | | | | | |
| | securities loans, rents | | | | | | | |
| | and income from simila | ır | | | | | | |
| _ | sources | | | | | | | |
| 9 | Net income from unrela business activities, wh | | | | | | | |
| | not the business is reg | | | | | | | |
| | carried on | | | | | | | |
| 10 | Other income (Explain | | | | | | | |
| | IV) Do not include gai from the sale of capital | | | | | | | |
| 11 | Total support (Add line | | | | | | | |
| | through 10) | | | | | | | |
| 12 | Gross receipts from re | lated activities | s, etc (See inst | ructions) | | | 12 | |
| 13 | First Five Years If the | | r the organizati | on's first, second | l, thırd, fourth, or | fıfth tax year as a | 501(c)(3) or | |
| | check this box and sto | p here | | | | | | ▶ □ |
| S | ection C. Computat | ion of Publ | ic Support F | Percentage | | | | |
| 14 | Public Support Percen | tage for 2011 | (line 6 column | (f) dıvıded by lıne | 11 column (f)) | | 14 | |
| 15 | Public Support Percen | tage for 2010 | Schedule A , Pa | rt II, line 14 | | | 15 | |
| 16a | 33 1/3% support test- | | | | | line 14 is 33 1/3% | % or more, che | |
| h | and stop here. The org 33 1/3% support test | | | | | 6a and line 15 is | 33 1/20% or m | ore check this |
| D | box and stop here. The | | | | | oa, and inte 15 IS | 1/3%0 UI M | ore, check this |
| 17a | 10%-facts-and-circum | - | • | | - | ne 13, 16a, or 16 | b and line 14 | ٠, |
| | ıs 10% or more, and ıf | | | | | | | |
| | in Part IV how the orga | anızatıon meet | s the "facts and | d circumstances" | test The organiz | zatıon qualıfıes as | a publicly su | |
| b | organization 10%-facts-and-circum | stances test— | 2010. If the ora | anization did not | check a hov on li | ne 13, 16a 16b | or 17a and lin | ▶ □ |
| , | 15 is 10% or more, an | | | | | | | - |
| | Explain in Part IV how | the organizati | | | | | | |
| 10 | supported organization Private Foundation If t | | n did not chools | a hov on line 12 | 16a 16h 17a a | or 17h chack this | hov and coc | ► □ |

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) 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 Gross receipts from activities that are not an unrelated trade or business under section 513 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 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

| Part IV | Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions). |
|---------|--|
| | |
| | Facts And Circumstances Test |
| | |
| | Explanation |
| | |
| | |
| | |
| | |

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493044007163

OMB No 1545-0047

┌ Yes

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Did the filing organization file Form 1120-POL for this year?

| | ection 50 f(c)(5) organizations that have filed Form 5766 (election under section 50 f(n)) Complete Part IFA Do | | | | | |
|-----|---|-------------|-------------|-------------|------|---|
| | ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-l | | | • | II-A | |
| | ne organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-℻, line 35c (| Prox | y Tax | , then | | |
| | ection 501(c)(4), (5), or (6) organizations Complete Part III | | | | | _ |
| | ame of the organization BANY LAW SCHOOL Employ | eride | entifica | ition numbe | er | |
| ALI | BANY LAW SCHOOL 14-133 | 830 | a | | | |
|)aı | rt I-A Complete if the organization is exempt under section 501(c) or is a section | | | anizatio | n. | - |
| | | | | , | | - |
| 1 | Provide a description of the organization's direct and indirect political campaign activities on behalf of o in opposition to candidates for public office in Part IV | r | | | | |
| 2 | ·· | _ | | | | |
| | Political expenditures | | \$ <u>_</u> | | | - |
| 3 | V olunteer hours | | _ | | | - |
| Par | rt I-B Complete if the organization is exempt under section 501(c)(3). | | | | | |
| 1 | Enter the amount of any excise tax incurred by the organization under section 4955 | ▶ | \$ | | | |
| 2 | Enter the amount of any excise tax incurred by organization managers under section 4955 | ► | \$ <u></u> | | | |
| 3 | If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | | | ┌ Yes | ┌ No | |
| 4a | Was a correction made? | | | ┌ Yes | ┌ No | |
| b | If "Yes," describe in Part IV | | | | | |
| Pai | rt I-C Complete if the organization is exempt under section 501(c) except section | n 50 |)1(c) | (3). | | |
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities | • | \$ | | | |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities | ► | \$ <u>_</u> | | | |
| 3 | Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b | - - | _ | | | |

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 - |
|----------|--------------------|----------------|--|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

f Grassroots lobbying expenditures

| (The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) | ווטפ | edule C (F | 01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1 | | | | | Page ∠ | | | |
|--|------|--------------|--|---------------------------|---|------------------|--------------------------|------------------|--|--|--|
| A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying) | Pa | rt II-A | | n is exempt under | section 501(| c)(3) and fi | iled Form 5768 | (election | | | |
| expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1 | ١ | Check | | an affiliated group (and | lıst ın Part IV ea | ch affiliated gr | oup member's nam | e, address, EIN, | | | |
| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. So of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. So of the excess over \$1,000,000 Fig. So of the excess over \$1,000 | | | expenses, and share of excess lob | bying expenditures) | | _ | • | | | | |
| Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Diver \$500,000 Diver \$500,000 Diver \$500,000 but not over \$1,000,000 Diver \$1,000,000 but not over \$1,000,0 | 3 | Check | ıf the filing organization checked bo | ox A and "limited contro | ol" provisions app | ly | 1 | 1 | | | |
| (The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1200,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1200,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,0 | | | Limits on Lobbying | Expenditures | | | (a) Filing | (b) Affiliated | | | |
| Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00 | | | | | l.) | | Organization's Totals | Group Totals | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 F17,000 | | - | | | 1 \ | | 100013 | 1 ocars | | | |
| c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 In the excess over \$1,000,000 F1,000,000 F1,000,0 | | | | · - | | | | | | | |
| d O ther exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000 | | | | | ying) | | | | | | |
| Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: | | | , | b) | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 but not over \$1,7000,000 Over \$17,000,000 but not over \$17,000,000 S225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 5% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S1,000,000 S1,000,0 | d | Otherexe | empt purpose expenditures | | | | | | | | |
| Columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 Over \$1,500,000 S1,000,000 | e | Total exe | mpt purpose expenditures (add lines 1 | .c and 1d) | | | | | | | |
| Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount | f | | nontaxable amount Enter the amount | from the following table | in both | | | | | | |
| Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00 | | If the an | ount on line 1e, column (a) or (b) is: | The lobbying nontax | able amount is: | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount | | Not over \$5 | 500,000 | 20% of the amount on lii | ne 1e | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00 | | Over \$500, | 000 but not over \$1,000,000 | \$100,000 plus 15% of the | e excess over \$500,0 | 000 | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount | | Over \$1,00 | 0,000 but not over \$1,500,000 | \$175,000 plus 10% of the | e excess over \$1,000 | ,000 | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount | | Over \$1,50 | 0,000 but not over \$17,000,000 | \$225,000 plus 5% of the | 25,000 plus 5% of the excess over \$1,500,000 | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount | | Over \$17,0 | 00,000 | \$1,000,000 | | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount | | | | | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount | | Grassroo | ts nontaxable amount (enter 25% of li | ne 1f) | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount | h | Subtract | line 1a from line 1a If zero or less. en | ter -0 - | | | | | | | |
| Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount | | | | | | | | | | | |
| 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount | | | | | organization file | Form 4720 re | portina | | | | |
| (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount | | | | | | | F - 1 - 1 - 1 - 1 | ┌ Yes ┌ No | | | |
| Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount | | (Sor | ne organizations that made a | section 501(h) el | ection do not | have to co | | ne five | | | |
| beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount | | | Lobbying Exp | enditures During | 4-Year Avera | ging Period | d | | | | |
| b Lobbying ceiling amount | | | | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) Total | | | |
| | 2a | Lobbyin | g non-taxable amount | | | | | | | | |
| | b | | | | | | | | | | |
| c Total lobbying expenditures | c | Total loi | obying expenditures | | | | | | | | |
| | | | | | | | | | | | |
| d Grassroots non-taxable amount | d | Grassro | ots non-taxable amount | | | | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | e | | | | | | | | | | |

| | · · · · · · · · · · · · · · · · · · · | |
|-----------|---------------------------------------|--|
| Part II-B | Complete if the organization i | s exempt under section 501(c)(3) and has NOT filed Form 5768 |
| | (election under section 501(h |)). |

| | | (| a) | (b) |
|----|--|-----|----|--------|
| | | Yes | No | Amount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| а | Volunteers? | | No | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | Yes | | |
| C | Media advertisements? | | No | |
| d | Mailings to members, legislators, or the public? | | No | |
| e | Publications, or published or broadcast statements? | | No | |
| f | Grants to other organizations for lobbying purposes? | | No | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | Yes | | 538 |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | No | |
| i | Other activities? If "Yes," describe in Part IV | | No | |
| j | Total lines 1c through 1i | | | 538 |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | No | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| C | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

| | | | Yes | No |
|---|--|---|-----|----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | | |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 | | |

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

| - | bues, assessments and similar amounts nom members | - | |
|---|--|----|--|
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| а | Current year | 2a | |
| b | Carryover from last year | 2b | |
| c | Total | 2c | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | |

Part IV Supplemental Information

Dues assessments and similar amounts from members

Taxable amount of lobbying and political expenditures (see instructions)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

| Identifier | Return Reference | Explanation |
|------------------|------------------|--|
| SchC_P2B_S00_L01 | , , | Albany Law School contacts local, state and federal officials to secure contract and grant funding associated with our educational mission |

1

5

DLN: 93493044007163

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization

Employer identification number

| | / LAW SCHOOL | | | | icion numbe | -1 |
|-------------------------|--|---|------------|-----------------|-------------|-----------|
| Part | I Organizations Maintaining Donor A | duicad Eunda as Othas Similas | | 1338309 | Comple | to if the |
| renu | organizations Maintaining Donor A organization answered "Yes" to Form 9 | | runas | or Accounts | • Comple | ເຂາເທ |
| | organization and rock to remin | (a) Donor advised funds | | (b) Funds and c | ther accou | nts |
| L T | otal number at end of year | | | | | |
| 2 A | ggregate contributions to (during year) | | | | | |
| 3 A | ggregate grants from (during year) | | | | | |
| 1 A | ggregate value at end of year | | | | | |
| | old the organization inform all donors and donor adv unds are the organization's property, subject to the | | onor adv | ısed | ┌ Yes | ┌ No |
| u | old the organization inform all grantees, donors, and sed only for charitable purposes and not for the be | | | | ┌ Yes | □ No |
| | onferring impermissible private benefit Conservation Easements. Complete | of the organization answered "Vest | " to Form | n 000 Dart IV | • | 1 140 |
| | · | | to Fori | 11 990, Part IV | 7, IIIe 7. | |
| . , , , , , | urpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space | | | | | a |
| | omplete lines 2a-2d if the organization held a qua asement on the last day of the tax year | lified conservation contribution in the fo | rm of a co | onservation | | |
| | asement on the last day of the tax year | | | Held at the | End of the | Year |
| a T | otal number of conservation easements | | 2a | | | |
| ьΤ | otal acreage restricted by conservation easements | S | 2b | | | |
| | lumber of conservation easements on a certified hi | | 2c | | | |
| _ | lumber of conservation easements included in (c) a | · , | 2d | | | |
| | lumber of conservation easements modified, transf he taxable year ► | erred, released, extinguished, or termina | ated by th | ne organization | during | |
| . N | lumber of states where property subject to conserv | vation easement is located 🕨 | | | | |
| | oes the organization have a written policy regardin nforcement of the conservation easements it holds | ng the periodic monitoring, inspection, h | | violations, and | │ ├ Yes | ┌ No |
| i 9 | taff and volunteer hours devoted to monitoring, ins | pecting and enforcing conservation eas | ements d | uring the vear | | |
| ^ | mount of expenses incurred in monitoring, inspect | | | | | |
| | +\$ | mg, and emoreing conservation caseme | nes dann | g the year | | |
| 3 [| oes each conservation easement reported on line 70(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | 2(d) above satisfy the requirements of s | ection | | ┌ Yes | ┌ No |
|) I | n Part XIV, describe how the organization reports of alance sheet, and include, if applicable, the text of the organization's accounting for conservation ease | the footnote to the organization's financ | | | | |
| art | | ons of Art, Historical Treasures | s, or Ot | her Similar | Assets. | |
| a | f the organization elected, as permitted under SFAS rt, historical treasures, or other similar assets held rovide, in Part XIV, the text of the footnote to its fi | S 116, not to report in its revenue state d for public exhibition, education or rese | arch ın fu | | | Ξ, |
| h | f the organization elected, as permitted under SFAS istorical treasures, or other similar assets held for rovide the following amounts relating to these item | public exhibition, education, or researc | | | | |
| (| i) Revenues included in Form 990, Part VIII, line : | 1 | | ► \$ | | |
| | ii) Assets included in Form 990, Part X | | | | | |
| <u>.</u> I | f the organization received or held works of art, his ollowing amounts required to be reported under SFA | | for finan | | | |
| | evenues included in Form 990, Part VIII, line 1 | | | ► \$ | | |
| Г | evenues included in Form 550, raic viri, lille i | | | F 4 | | |

b Assets included in Form 990, Part X

| Pali | Organizations Maintaining Colle | ctions of Art, H | ISTO | ricai ire | easu | ires, or Othe | r Similar As | sets (| <u>:ontinuea)</u> |
|------|--|------------------------|---------|---------------------------------------|--------|---|---------------------------------------|---------|-------------------|
| 3 | Using the organization's accession and other relatems (check all that apply) | ecords, check any of | the f | ollowing th | nat ar | e a significant i | use of its collect | ion | |
| а | Public exhibition | d | Γ | Loan o | rexc | hange programs | 5 | | |
| b | Scholarly research | е | Г | Other | | | | | |
| c | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's colle | ections and explain h | ow th | ev further | the o | organization's e | xempt purpose | n | |
| • | Part XIV | | | | | _ | | | |
| 5 | During the year, did the organization solicit or i assets to be sold to raise funds rather than to l | | | | | | | ┌ Yes | □ No |
| Par | t IV Escrow and Custodial Arranger Part IV, line 9, or reported an amo | nents. Complete | ıf the | e organiz | atıo | | | | 1 110 |
| 1a | Is the organization an agent, trustee, custodian included on Form 990, Part X? | · | | | | or other assets | not | ┌ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XIV a | nd complete the follo | owing | table | | | , | | |
| | | | | | | | An | nount | |
| С | Beginning balance | | | | | 1c | | | |
| d | Additions during the year | | | | | 1d | | | |
| е | Distributions during the year | | | | | 1e | | | |
| f | Ending balance | | | | | 1f | | | |
| 2a | Did the organization include an amount on Form | າ 990, Part X, line 21 | L? | | | | | ☐ Yes | ☐ No |
| | If "Yes," explain the arrangement in Part XIV | | | | | | | | |
| Pa | rt V Endowment Funds. Complete if t | | | red "Yes or Year | | | rt IV, line 10. I)Three Years Back | (e)Four | Years Back |
| 1a | Beginning of year balance | 34,102,812 | | 19,894,845 | (0) | 17,734,818 | 21,476,457 | | Tears back |
| b | Contributions | 1,170,959 | | 9,857,984 | | 1,052,493 | 379,004 | ŀ | |
| С | Investment earnings or losses | 1,031,750 | | 4,968,154 | | 2,328,330 | -2,847,21 | | |
| d | Grants or scholarships | 171,501 | | 168,871 | | 344,134 | 362,292 | 2 | |
| e | Other expenditures for facilities and programs | 335,422 | | 299,501 | | 719,616 | 777,320 |) | |
| f | Administrative expenses | 139,717 | | 149,799 | | 157,046 | 133,820 |) | |
| g | End of year balance | 35,658,881 | ; | 34,102,812 | | 19,894,845 | 17,734,818 | 3 | |
| 2 | Provide the estimated percentage of the year e | nd balance held as | | | | | | | |
| а | Board designated or quasi-endowment 🕨 | 624% | | | | | | | |
| b | Permanent endowment ► 37 6 % | | | | | | | | |
| С | Term endowment ► 0 % | | | | | | | | |
| 3a | Are there endowment funds not in the possessi | on of the organizatio | n tha | t are held | and a | admınıstered for | the | | |
| | organization by | | | | | | 20/ | Yes | No No |
| | (i) unrelated organizations | | | | • | | 3a(| | No |
| ь | If "Yes" to 3a(II), are the related organizations | | | | | | 31 | | 1 |
| 4 | Describe in Part XIV the intended uses of the c | • | | | | | | I | |
| Par | t VI Land, Buildings, and Equipmen | t. See Form 990, I | Part | X, line 10 | 0. | | | | |
| | Description of property | | | a) Cost or of asis (investm | | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) E | Book value |
| 1a | Land | | \top | | 0 | 2,256,405 | | | 2,256,405 |
| Ь | Buildings | | | | 0 | 31,755,601 | 15,054,42 | 2 | 16,701,179 |
| c | Leasehold improvements | | | | 0 | 0 | | 0 | 0 |
| d I | Equipment | | | | 0 | 13,378,752 | 10,056,16 | 2 | 3,322,590 |
| e | Other | <u> </u> | | | 0 | 1,621,913 | 542,79 | 7 | 1,079,116 |
| | I. Add lines 1a-1e (Column (d) should equal Form | 990, Part X, column (| B), III | ne 10(c).) | | | | | 23,359,290 |

| Part VII Investments—Other Securities. See | Form 990, Part X, line 1 | | |
|--|--------------------------|----------------|--|
| (a) Description of security or category (including name of security) | (b)Book value | | od of valuation f-year market value |
| (1)Financial derivatives | | Cost of end-o | i-year market value |
| | | | |
| (2)Closely-held equity interests | | | |
| Other | | | |
| | | | |
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| () () () () () () () () () () | 5 000 5 137 1 | 10 | |
| Part VIII Investments—Program Related. Se | e Form 990, Part X, line | | |
| (a) Description of investment type | (b) Book value | | od of valuation f-year market value |
| | | Cost of elia-o | i-year market value |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 13) | • | | |
| Part IX Other Assets. See Form 990, Part X, li | ne 15. | | |
| (a) Descri | ption | | (b) Book value |
| (1) Deposits | | | 5,000 |
| (2) Loan Repayment Program | | | 39,946 |
| (3) Bond issuance costs | | | 451,357 |
| (4) Beneficial interest in trusts | | | 8,304,540 |
| (+) Deliencial interest in trusts | | | 0,304,340 |
| | | | |
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| | | | |
| | | | |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 3 | 15) | <u> </u> | 8,800,843 |
| | | <u> </u> | 8,800,843 |
| Part X Other Liabilities. See Form 990, Part X (a) Description of Liability | | | |
| 1 (a) Description of Liability | (b) A mount | | |
| Federal Income Taxes | | | |
| US Government advances for Perkins loans | 2,531,968 | | |
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| | | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 25) | 2,531,968 | | |
| (Colonini (D) Should Equal Form 550, Falt A, COI (D) IIIC 25) | 2,531,968 | | |

| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 34,737,990 |
|------|--|------------|------------|
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 31,290,647 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 3,447,343 |
| 4 | Net unrealized gains (losses) on investments | 4 | -43,605 |
| 5 | Donated services and use of facilities | 5 | 0 |
| 6 | Investment expenses | 6 | 0 |
| 7 | Prior period adjustments | 7 | 0 |
| 8 | Other (Describe in Part XIV) | 8 | -1,381,710 |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9 | -1,425,315 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | 2,022,028 |
| Par | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p | er R | eturn |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 29,248,076 |
| 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 | | |
| c | Recoveries of prior year grants | | |
| d | Other (Describe in Part XIV) | | |
| e | Add lines 2a through 2d | 2e | -5,489,914 |
| 3 | Subtract line 2e from line 1 | 3 | 34,737,990 |
| 4 | A mounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0 | | |
| b | Other (Describe in Part XIV) 4b 0 | | |
| C | Add lines 4a and 4b | 4 c | 0 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 34,737,990 |
| Part | Reconciliation of Expenses per Audited Financial Statements With Expenses | per | |
| 1 | Total expenses and losses per audited financial statements | 1 | 27,226,048 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| а | Donated services and use of facilities | | |
| ь | Prior year adjustments | | |
| c | Other losses | 1 | |
| d | Other (Describe in Part XIV) | 1 | |
| e | Add lines 2a through 2d | 2e | 1,396,114 |
| 3 | Subtract line 2e from line 1 | 3 | 25,829,934 |
| 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 0 | | |
| b | Other (Describe in Part XIV) | | |
| c | Add lines 4a and 4b | 4c | 5,460,713 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 31,290,647 |
| Pa | rt XIV Supplemental Information | | |
| _ | | | |

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

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

| Identifier | Return Reference | Explanation |
|-------------------|--------------------------------|--|
| SchD_P05_S00_L04 | Schedule D, Part V, Line 4 | Endowment funds are either donor restricted or board designated/quasi endowment funds. In general, the use of the funds' investment income is generally earmarked for scholarships, fellowships, prizes, endowed and distinguished professorships and academic programs. |
| SchD_P10_S00_L02 | Schedule D, Part X, Line 2 | The School evaluated its tax positions and concluded that it does not have any uncertain tax positions that meet the criteria under FIN 48 (ASC 740) |
| SchD_P11_S00_L08 | Schedule D, Part XI, Line 8 | Change in value of beneficial interest in trusts \$14,404 and Postretirement-related changes other than net periodic cost (\$1,396,114) |
| SchD_P12_S00_L02d | Schedule D, Part XII, Line 2d | Student financial aid (\$5,460,713) and Change in value of beneficial interest in trusts \$14,404 |
| SchD_P13_S00_L02d | Schedule D, Part XIII, Line 2d | Postretirement-related changes other than net periodic cost \$1,396,114 |
| SchD_P13_S00_L04b | Schedule D, Part XIII, Line 4b | Student financial aid \$5,460,713 |

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DLN: 93493044007163

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

ALBANY LAW SCHOOL

Name of the organization

Schools ▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13,

or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

Employer identification number

| | 14-1338309 | | | |
|----|--|----|-----|----|
| Pa | rtI | | YES | NO |
| 1 | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | 1 | Yes | |
| 2 | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, | | | |
| _ | programs, and scholarships? | 2 | Yes | |
| 3 | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II | 3 | Yes | |
| | | | | |
| | Does the organization maintain the following? | 1 | | |
| | Records indicating the racial composition of the student body, faculty, and administrative staff? | 4a | Yes | |
| b | Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | 4b | Yes | |
| C | Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | 4c | Yes | |
| d | Copies of all material used by the organization or on its behalf to solicit contributions? | 4d | Yes | |
| | If you answered "No" to any of the above, please explain If you need more space, use Part II | | | |
| | Does the organization discriminate by race in any way with respect to Students' rights or privileges? | | | No |
| b | Admissions policies? | 5b | | No |
| c | Employment of faculty or administrative staff? | 5c | | No |
| d | Scholarships or other financial assistance? | 5d | | Νo |
| | Educational policies? | 5e | | No |
| f | Use of facilities? | 5f | | No |
| g | Athletic programs? | 5g | | Νo |
| h | Other extracurricular activities? | 5h | | No |
| | If you answered "Yes" to any of the above, please explain If you need more space, use Part II | | | |
| 6a | Does the organization receive any financial aid or assistance from a governmental agency? | | Yes | |
| | Has the organization's right to such aid ever been revoked or suspended? | 6b | | Νo |
| 7 | If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 | | | |
| | of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Part II | 7 | Yes | |

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

| ldentifier | Return Reference | Explanation |
|------------------|-------------------------------|--|
| SchE_P01_S00_L03 | Schedule E, Part I, Line 3 | The policy is published annually in the new spaper |
| SchE_P01_S00_L06 | Schedule E, Part I, Line 6 | Albany Law School participates in the following Federal Financial Assistance programs and grants Department of Education (Federal Work-Study, William D. Ford Direct Loans and Perkins Loan Programs and State Fiscal Stabilization Fund - Government Services passed through New York State Housing Trust Fund Corporation), US Department of Health and Human Services (Developmental Disabilities Basic Support and Advocacy Grants passed through New York State Commission on Quality of Care and Advocacy for Persons with Disabilities), and US Department of Treasury/Internal Revenue Service (Low Income Taxpayer Clinics) |

Schedule E (Form 990 or 990-EZ) 2011

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As Filed Data -

DLN: 93493044007163

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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

Supplemental Information Regarding

Fundraising or Gaming Activities

| Name of the organization Employer identif | | | | | tification number | | |
|---|---|--------------------------------------|---|--------------------------------------|-------------------|---|--|
| ALBANY LAW SCHOOL | | | | | | 14-1338309 | |
| Part I Fundraising A | ctivities. Complete | e if the c | organiza | tion answered "Yes" | to Form | 990, Part IV | , lıne 17. |
| 1 Indicate whether the org | janization raised funds | through a | ny of the | following activities Che | eck all th | nat apply | |
| a Mail solicitations | | • | • | Solicitation of non | | | |
| b Internet and e-mail | solicitations | | f | Solicitation of gov | ernment | t grants | |
| c 🔽 Phone solicitations | | | g | Special fundraisin | g events | 5 | |
| d In-person solicitation | ons | | | | | | |
| 2a Did the organization hav or key employees listed | | | | | | | ∇ _{Yes} Γ _{No} |
| b If "Yes," list the ten high to be compensated at le | | | | | | | |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | fundrais custo cont contrib | Did ser have ody or rol of outions? | (iv) Gross receipts from activity | or r fundra | mount paid to etained by) user listed in col (i) | (vi) A mount paid to (or retained by) organization |
| Stockade Consulting Group 650 Franklin Street Schenectady, NY 12305 | The entity assists with phone solicitation for the Albany Law School's annual | Yes | No No | 49,370 | | 15,088 | 34,282 |
| | fund campaign | | | | | | |
| | | | | | | | |
| Total | | | | 49,370 | | 15,088 | 34,282 |
| 3 List all states in which the licensing | ne organization is regis | stered or I | ıcensed t | o solicit funds or has be | en notifi | ied it is exempt | from registration or |
| NY | | | | | | | |
| | | | | | | · | |

| Part I | Fundraising Events. Commore than \$15,000 on Form | | | | |
|-------------|--|---------------------------|--|--------------------------|--|
| | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total Events (Add col (a) through col (c)) |
| | | (event type) | (event type) | (total number) | (4) |
| 1 2 | Gross receipts | | | | |
| 2 | Less Charitable | | | | |
| 3 | contributions Gross income (line 1 | | | | |
| | minus line 2) | | | | |
| 4 | Cash prizes | | | | |
| 5 | Non-cash prizes | | | | |
| 6 | Rent/facility costs | | | | |
| . 7 | Food and beverages | | | | |
| 8 | Entertainment | | | | |
| 9 | Other direct expenses . | | | | |
| 10 | Direct expense summary Add lir | nes 4 through 9 in colum | an (d) | . | (|
| 111 | • | _ | • • | | , |
| | | | | | |
| art I | Gaming. Complete if the o \$15,000 on Form 990-EZ, li | | i tes lo foilii 990, Pa | rt IV, iiile 19, or repo | orted more than |
| | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (Add col (a) through col (c)) |
| | Gross revenue | | | | |
| 2 | Cash prizes | | | | |
| 3 | Non-cash prizes | | | | |
| 1 4 | | | | | |
| 4 | Rent/racinty costs | | | | |
| 5 | Other direct expenses | | | | |
| 6 | Volunteer labor | ┌ Yes | | ┌ Yes | |
| | | Г № | ΓNο | Γ No | _ |
| 7 | Direct expense summary Add line | s 2 through 5 in columr | n (d) | | (|
| | | | | | |
| 8 | Net gaming income summary Com | ndine lines 1 and 7 in co | olumn (a) | <u> </u> | |
| | nter the state(s) in which the organiz | | | | |
| Is | the organization licensed to operate | e gamıng actıvıtıes ın ea | ch of these states? | | · Fyes Fno |
| b If | "No," Explain | | | | |
| | | | | | |
| a W | ere any of the organization's gaming | | | | |
| | "Yes," Explain | | | | - , res , NO |
| | | | | | |
| | | | | | |

| Sche | dule G (Form 990 or 990-EZ) 20 | 11 | | | Page 3 |
|---------|--|---|--------------------------------------|--------------------|---------------|
| 11 | Does the organization operate ga | aming activities with nonmembers? . | | Г _{Yes} Г | - No |
| 12 | Is the organization a grantor, be | neficiary or trustee of a trust or a mem | per of a partnership or other entity | | |
| | formed to administer charitable (| gamıng? | | · · · · F Yes F | - No |
| 13 | Indicate the percentage of gamii | ag activity operated in | | 1 1 | |
| a | | | | 13a | |
| b | | | | | |
| 14 | | f the person who prepares the organiza | | | |
| | Name ► | | | | |
| | Address ► | | | | |
| | revenue? | ntract with a third party from whom the | | | - No |
| | | ed by the third party 🟲 \$ | | | |
| С | If "Yes," enter name and address | S | | | |
| | Name 🟲 | | | | |
| | Address ► | | | | |
| 16 | Gaming manager information | | | | |
| | Name 🟲 | | | | |
| | Gaming manager compensation I | \$ \$ | | | |
| | Description of services provided | > | | | |
| 17 a | | Employee er state law to make charitable distribu | | · · · | - No |
| b | Enter the amount of distributions | required under state law distributed to | o other exempt organizations or sp | | - |
| _ | | activities during the tax year > \$ | | hadala C / | |
| Par | t IV Complete this part to property instructions.) | provide additional information for | responses to quuestion on Sc | nedule G (see | |
| | Identifier | ReturnReference | Explana | tion | |
| | | • | • | | |

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(Form 990)

Department of the Treasury

Schedule I

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

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

OMB No 1545-0047

DLN: 93493044007163

Inspection

Internal Revenue Service Name of the organization Employer identification number ALBANY LAW SCHOOL 14-1338309 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

| Part III | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered " | Yes" to Form 990, | Part IV, line 22. |
|----------|--|-------------------|-------------------|
| | Use Schedule I-1 (Form 990) if additional space is needed. | | |

| (a)Type of grant or assistance | (b) Number of recipients | (c) A mount of cash grant | (d)A mount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--|----------------------------------|-------------------------------------|-----------------------------------|--|---------------------------------------|
| (1) Scholarships, fellowships and grants | 247 | 5,283,882 | 0 | | |
| | | | | | |
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

| | - Capprometrial Intermediation Complete the part to provide the intermediation required in rate 27 mile 27 and any other dualities in complete the part to provide the intermediation required in rate 27 mile 27 and any other dualities in complete the part to provide the intermediation required in rate 27 mile 27 and any other dualities in complete the part to provide the part to part | | | | | | |
|------------------|---|--|--|--|--|--|--|
| Identifier | Return Reference | Explanation | | | | | |
| SchI_P01_S00_L02 | Schedule I, Part I, Line 2 | Each year Albany Law School awards a number of merit and diversity scholarships funded from restricted and unrestricted endowment funds, annual giving by alumni and friends and other sources. The Admissions Committee awards the scholarships to first year students in the form of three year scholarships in varying amounts. Financial Aid personnel, in conjunction with Development and Business Office personnel, is responsible for monitoring compliance with donor restrictions associated with endowment funds. All scholarships are merit-based and awarded on the basis of academic promise and individual characteristics that strengthen the applicant pool. The Admissions Committee also offers merit-based scholarships to students from diverse backgrounds including those minorities who, historically, have been under-represented in the legal profession. A scholarship may be retained from year to year without re-application upon achievement of grades set forth as conditions of the award. Monitoring of continued awarding for second and third year students is performed by the Financial Aid Office in conjunction with the Registrar's Office. | | | | | |

DLN: 93493044007163

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

| ALB | ANY LAW SCHOOL 14-1338309 | | | |
|-----|---|----------|-----|-----|
| Pa | rt I Questions Regarding Compensation | | | |
| | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | | | |
| | | | | |
| | Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain | 1b | Yes | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | Yes | |
| 3 | Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, Part 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? | 4a | | No |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | No |
| c | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | | |
| 5 | For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of | | | |
| а | The organization? | 5a | | Νo |
| b | Any related organization? | 5b | | Νo |
| | If "Yes," to line 5a or 5b, describe in Part III | | | |
| 6 | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | | |
| а | The organization? | 6a | | No |
| b | Any related organization? | 6b | | Νo |
| | If "Yes," to line 6a or 6b, describe in Part III | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | | No |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III | 8 | | No |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations | | | 100 |

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

| (A) Name | | (B) Breakdown of | W-2 and/or 1099-MI | SC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation | |
|----------------------|-------------|---------------------------|--------------------|---|--------------------------------|----------------|----------------------|---|--|
| | | compensation incentive re | | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or Form 990-EZ | |
| 1) Thomas F Guernsey | (I) (II) | 301,614 0 | 0 0 | 22,725 0 | 22,050 0 | 9,432 0 | 355,821 0 | | |
| 2) Connie Mayer | (I) (II) | 205,202 0 | 0 0 | 1,623 0 | 17,853 0 | 13,231 0 | 237,909 0 | | |
| 3) Victor E Rauscher | (I) (II) | 182,696 0 | 0 0 | 18,775 0 | 15,890 0 | 4,793 0 | 222,154 0 | | |
| 4) Paul Fınkelman | (ı) (ıı) | 228,122 0 | 0 0 | 24,772 0 | 20,073 0 | 13,226 0 | 286,193 0 | | |
| 5) Sheldon W Halpern | (ı) (ıı) | 229,152 0 | 0 0 | 23,708 0 | 20,027 0 | 13,226 0 | 286,113 0 | | |
| 6) Patrıcıa E Salkın | (I) (II) | 209,688 0 | 0 | 17,130 0 | 22,541 0 | 13,231 0 | 262,590 0 | | |
| 7) James Gathıı | (I) (II) | 188,093 0 | 0 0 | 12,630 0 | 15,060 0 | 13,231 0 | 229,014 | | |
| 8) Ira M Bloom | (1) | 176,913 0 | 0 0 | 24,667 0 | 18,785 0 | 9 ,4 3 5 0 | 229,800 | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

| Ident if ier | Return Reference | Explanation |
|-------------------|---------------------|--|
| SchJ_P01_S00_L01a | Part I, Line 1a | All faculty members are allotted a discretionary spending account each year for travel, books, and memberships and dues Support for all expenditures is required to be submitted. The President and Dean is provided with memberships to social clubs as part of the contractual agreement with Albany Law School. |

Schedule J (Form 990) 2011

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493044007163

2011

Open to Public Inspection

Internal Revenue Service
Name of the organization
ALBANY LAW SCHOO

Department of the Treasury

Employer identification number

| ALB | SANY LAW SCHOOL | | | | | | | | | 1 | 4-133 | 8309 | | | |
|---------------------------|--|------------------------|--------------------|-----------------|---------------------|--------|----------|---------------|-------------|---------------------|-------|--------------------|-------|---------------|----|
| Pa | art I Bond Issues | | | | | | | | | | | | | | |
| | (a) Issuer Name | (b) Issuer EIN | (c) CUSIP # | (d) Date Issued | (e) Issue Pr | псе | (f) | Description | of Purpose | (g) Defeas | | (h) Beha Iss | alfof | f of financin | |
| | | | | | | | | | | Yes | No | Yes | No | Yes | No |
| A | City of Albany Industrial Development Agency | 52-2015750 | 012440JD6 | 06-25-2007 | 18,947 | ,846 F | Refina | ancing and la | nd purchase | | × | | X | | x |
| Pa | rt III Proceeds | • | | • | | | | | | | | • | | | • |
| | | | | | Α | | | E | 3 | | С | | | D | |
| 1 Amount of bonds retired | | | | | | 0 | | | | | | | | | |
| 2 | Amount of bonds defeased | | | | | | 0 | | | | | | | | |
| 3 | Total proceeds of issue | | | | 1 | 8,947, | ,846 | | | | | | | | |
| 4 | Gross proceeds in reserve fu | nds | | | | 1,379, | ,543 | | | | | | | | |
| 5 | Capitalized interest from proc | ceeds | | | | | 0 | 0 | | | | | | | |
| 6 | Proceeds in refunding escrow | v | | | 1 | 5,096, | ,040 | | | | | | | | |
| 7 | Issuance costs from proceed | ls | | | | 378, | ,956 | | | | | | | | |
| 8 | Credit enhancement from pro | ceeds | | | | | 0 | | | | | | | | |
| 9 | Working capital expenditures | from proceeds | | | | 0 | | | | | | | | | |
| 10 | Capital expenditures from pro | oceeds | | | 2,093,306 | | | | | | | | | | |
| 11 | Other spent proceeds | | | | | | 0 | | | | | | | | |
| 12 | Other unspent proceeds | | | | | | 0 | | | | | | | | |
| 13 | Year of substantial completio | n | | | 200 | 7 | | | | | | | • | | |
| | | | | | Yes | No | | Yes | No | Yes | | No | Yes | , | No |
| 14 | Were the bonds issued as pai | rt of a current refund | ing issue? | | | Х | | | | | | | | | |
| 15 | Were the bonds issued as pai | rt of an advance refu | nding issue? | | × | | | | | | | | | | |
| 16 | 16 Has the final allocation of proceeds been made? | | | Х | | | | | | | | | | | |
| 17 | Does the organization maintain adequate books and records to support the final allocation of proceeds? | | | х | | | | | | | | | | | |
| Pa | rt IIII Private Business l | Use | | | | | | | | | | | | | |
| | | | | | A | | | E | | | C | | ļ | D | |
| | | | | | Yes | No | <u> </u> | Yes | No | Yes | | No | Yes | • | No |

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

| Sche | dule K (Form 990) 2011 | | | | | | | | Page 2 |
|------|--|-----|-----|-----|----|-----|----|----------|---------------|
| Par | t IIII Private Business Use (Continued) | | | | | | | | |
| | | | 4 | | В | | С | D | |
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a | Are there any management or service contracts that may result in private business use? | | Х | | | | | | |
| b | If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| С | Are there any research agreements that may result in private business use of bond-financed property? | | х | | | | | | |
| d | If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 | Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government | | 0 % | | • | | | | |
| 5 | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government | | 0 % | | | | | | |
| 6 | Total of lines 4 and 5 | | 0 % | | | | | | |
| 7 | Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | | х | | | | | | |
| Pai | t IV Arbitrage | | | | | | | | |
| | l a | | | D | | _ | | D | |

Yes No Yes No Yes No Yes No Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and 1 Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? Χ Is the bond issue a variable rate issue? Χ Has the organization or the governmental issuer entered За into a hedge with respect to the bond issue?

| b | Name of provider | | | | |
|----|---|---|--|--|--|
| С | Term of hedge | | | | |
| d | Was the hedge superintegrated? | | | | |
| e | Was a hedge terminated? | | | | |
| la | Were gross proceeds invested in a GIC? | Х | | | |
| ь | Name of provider | | | | |
| С | Term of GIC | | | | |
| d | Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | |
| ; | Were any gross proceeds invested beyond an available temporary period? | х | | | |
| | Did the bond issue qualify for an exception to rebate? | | | | |

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Part VI Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier Return Reference Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493044007163

Inspection

OMB No 1545-0047

SCHEDULE M NonCash Contributions (Form 990)

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

Name of the organization ALBANY LAW SCHOOL

Department of the Treasury

Internal Revenue Service

Employer identification number

| | | | | | 14-1338309 | | | |
|-----|--|----------------------------------|--|---|--|---------------|-----|----|
| Pa | Types of Property | | | <u> </u> | | | | |
| | | (a) Check If applicable | (b) Number of Contributions or items contributed | (c) Contribution amounts reported on Form 990, Part VIII, line 1g | (d Method of d contribution | - etermı | _ | |
| | Art—Works of art | | | | | | | |
| | Art—Historical treasures . | | | | | | | |
| | Art—Fractional interests | | | | | | | |
| | Books and publications | Х | | 992,337 | Fair market value | | | |
| 5 | Clothing and household goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| | Intellectual property | | | | | | | |
| 9 | Securities—Publicly traded . | Х | 16 | 126,495 | A verage market val | ue | | |
| 10 | Securities—Closely held stock . | | | | | | | |
| 11 | Securities—Partnership, LLC, or trust interests | | | | | | | |
| 12 | Securities—Miscellaneous | | | | | | | |
| 13 | Qualified conservation contribution—Historic structures | | | | | | | |
| 14 | Qualified conservation contribution—Other | | | | | | | |
| 15 | Real estate—Residential . | | | | | | | |
| 16 | Real estate—Commercial | | | | | | | |
| 17 | Real estate—Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | | | |
| 20 | Drugs and medical supplies . | | | | | | | |
| 21 | Taxıdermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | | | | | |
| | Gıft | | | | | | | |
| | O ther ▶ (<u>certificates</u>) | X | 5 | 2,884 | Fair market value | | | |
| | O ther ►() | | | | | | | |
| | O ther ►() | | | | | | | |
| | O ther ▶ () | | | | 1 | | | |
| 29 | Number of Forms 8283 received for which the organization compl | | | | 29 | | | 0 |
| | | | | | | | Yes | No |
| 30a | During the year, did the organiza | ition receiv | e by contribution any prope | erty reported in Part I, lines | 1-28 that it | | | |
| | must hold for at least three year | s from the | date of the initial contributi | on, and which is not require | d to be used | | | |
| | for exempt purposes for the enti | re holding p | period? | | | 30a | | No |
| ь | If "Yes," describe the arrangeme | ent in Part 1 | II | | | | | |
| 31 | Does the organization have a gif | t acceptan | ce policy that requires the i | review of any non-standard | contributions? | 31 | Yes | |
| 32a | Does the organization hire or us contributions? | e thırd part | es or related organizations | to solicit, process, or sell | non-cash | 32a | | No |
| b | If "Yes," describe in Part II | | | | | _ | | |
| 33 | If the organization did not report | revenues i | n column (c) for a type of p | roperty for which column (a |) is checked, | | | |
| | describe in Part II | | , , , p | . , | ,, | | | |

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Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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SCHEDULE O

As Filed Data -

DLN: 93493044007163

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Open to Public Inspection

OMB No 1545-0047

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

Name of the organization ALBANY LAW SCHOOL

(Form 990 or 990-EZ)

Employer identification number

14-1338309

| ldentifier | Return Reference | Explanation |
|-------------------|--|--|
| F990_P06_S0B_L11b | Form 990, Part VI, Section B, Line 11b | A review of the public portions of the 990 tax return (Schedule B details are not reviewed) is first conducted by the Vice President for Finance and Business with the Audit Committee and President at a regularly scheduled meeting of the Audit Committee. This review highlights significant aspects of the return. Subsequent to the Audit Committee meeting, a copy of the public portions of the 990 tax return (Schedule B is not included) is provided to each voting Board member, in addition to a summary of the Audit Committee's review of the tax return during a regularly scheduled meeting of the Board of Trustees prior to the filing of the return. |

| ldentifier | Return Reference | Explanation |
|-------------------|---|--|
| F990_P06_S0B_L12c | Form 990, Part VI, Section B, Line 12c | On an annual basis, each Board member, officer and key employee is provided with a copy of the Conflict of Interest Policy and a disclosure form to identify any known or potential conflict. The disclosure forms are returned to the Vice President for Finance and Business to summarize any conflicts which are identified. The summarization includes a description of the conflict and proposed resolution and is presented to the Audit Committee of the Board of Trustees for discussion. The Audit Committee then recommends to the Board the appropriate action to be taken for each identified conflict. Any member found to have a conflict or potential conflict is recused from the deliberations concerning the conflict and also decisions concerning any transaction associated with the conflict. If a conflict arises mid year, a new disclosure form is required to be submitted by the affected individual and another review by the Audit Committee and Board is undertaken. In order to waive a conflict, the policy requires 75% of the voting members to vote in favor of waiving the conflict. |

| ldentifier | Return Reference | Explanation |
|------------------|---|---|
| F990_P06_S0B_L15 | Form 990, Part VI, Section B, Line 15 | The Compensation Committee of the Board of Trustees is charged with the annual review of the top management official's (President and Dean) compensation. The President and Dean provides the Compensation Committee with an annual self assessment for their review. In addition, the Committee utilizes comparable compensation data of other presidents and deans in order to make a compensation recommendation to the entire Board of Trustees. The deliberations by the Compensation Committee and Board of Trustees are held solely by the members with no management or staff involved in those deliberations. The President and Dean is responsible for determining the compensation of her/his direct reports (key employees). The compensation review includes examining comparable compensation data for similar positions. |

| Identifier Return Reference | | Explanation | | | | | | |
|-----------------------------|--|--|--|--|--|--|--|--|
| F990_P06_S0C_L19 | | Governing documents, the conflict of interest policy and financial statements are not generally made available to the public. Certain documents are available upon request | | | | | | |

| ldentifier | Return Reference | Explanation |
|------------------|------------------------------|--|
| F990_P11_S00_L05 | Form 990, Part XI, Line 5 | Net unrealized losses on investment (\$43,605), Change in Beneficial Interest in Trust \$14,404, Postretirement-related changes other than net periodic cost (\$1,396,114) |

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

| Compensated Employees, and Independent Contractors | | | | | | | | | | | | |
|---|--|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|--|--|
| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other | | |
| | | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the organization (W- 2/1099-MISC) | from related organizations (W- 2/1099- MISC) | compensation from the organization and related organizations | | |
| Daniel P Nolan Trustee-Treasurer | 0 | × | | | | | | 0 | 0 | 0 | | |
| Vonzell Jones Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| William J Curry Trustee | 0 | х | | | | | | 0 | 0 | 0 | | |
| Hanok George Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| James E Hacker Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| Christina L Roberts-Ryba Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| Katherine M Sheehan Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| Christine G Stone Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| Michael J Garcia Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| Hon Anthony V Cardona Trustee | 0 | х | | | | | | 0 | 0 | 0 | | |
| Gail M Norris Trustee | 0 | Х | | | | | | 0 | 0 | 0 | | |
| Connie Mayer Interim President and Dean | 35 | | | Х | | | | 205,202 | 0 | 37,636 | | |
| Victor E Rauscher Vice President for Finance & Business | 35 | | | | Х | | | 182,696 | 0 | 22,374 | | |
| Ira M Bloom Faculty | 35 | | | | | × | | 176,913 | 0 | 36,580 | | |
| Paul Finkelman Faculty | 35 | | | | | X | | 228,122 | 0 | 43,999 | | |
| Patricia E Salkin Associate Dean | 35 | | | | | Х | | 209,688 | 0 | 43,525 | | |
| Sheldon W Halpern Faculty | 35 | | | | | Х | | 229,152 | 0 | 43,693 | | |
| James Gathii Associate Dean | 35 | | | | | Х | | 188,093 | 0 | 34,003 | | |
| Thomas F Guernsey Former President & Dean | 35 | | | | | | х | 301,614 | 0 | 35,106 | | |