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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)

benefit trust or private foundation)

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

OMB No 1545-0047
2012
Open to Public

A		e 2012 ca	lendar year, or tax year be		ос а сору сталоток			nding					
_		applicable			e European Univer				D Employ	ver ide	ntification	number	
	Address		Doing Business As	ana ioi uni	E Luiopean Oniver	sity at St. Fel	CISU	ng					
二	Name ch	_	Number and street (or P O be	ov if mail is no	t delivered to street add	ress) Room/s	urto		59-37807 E Telepho		mber		
=	Initial reti	_	·	JX 11 111011 13 110	e delivered to direct dadi	1000,							
=			1825 Encore Lane City, town or post office, state	1 7ID 1					(734) 730)-969t	<u> </u>		
≍	Terminat			, and ZIP code		40	400					4	400 004
=	Amended		Ann Arbor		<u>MI</u>	48	103	<u> </u>	G Gross r	<u> </u>			408,034
Ш,	Application	on pending	F Name and address of principal						this a group r			=	No.
			William G Rosenberg 182	5 Encore L	ane, Ann Arbor, M	<u>/II 48103</u>		H(b) Are	e all affiliates	ınclude	ed?	Yes	No
<u></u> T	ax-exem	npt status	X 501(c)(3) 501(c)	() <	(insert no) 49	47(a)(1) or	527	Jf"	'No," attach a	alıst (s	ee instructi	ons)	
JV	Vebsite	e: ► N/A						H(c) Gr	oup exemption	on numi	ber 🕨		
KF	orm of o	rganization	X Corporation Trust	Associ	ation Other ►		L Yea	r of forma	ation 200	15	M State of	legal domicile	
_	art I	·	mmary						200	<u> </u>			IVII
	1		escribe the organization's	miccion or	most significant or	ctuation	Ton	roudo f	inancial ci	unnor	t through		
	1 '		or educational, research, a						inancial si	nbboi	tunougn		
æ							cience	es allu			-		
Jan		humanities at the European University at St. Petersburg, Russia											
Activities & Governance	١,	Charlet											
ŝ	2		his box • if the organ				osea	or more	e than 25%	1 -	1	sets.	
න් ගු	3 4		of voting members of the of independent voting me				4 14 \			3	_		<u>6</u>
)ţie										4	-		6
Ę	5		mber of individuals employ mber of volunteers (estimate)			art v, line za)				5	_		0
•	7a		•		• *	o 12				7			0
	7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34									71	$\overline{}$		0
	 	- ivot unit	nated basiness taxable int	Joine Hom	<u></u>				Prior Year		_	Current Ye	<u>_</u>
.v	8								301,41	17		635,291	
	9		service revenue (Part VII						0,0	,,,,,	0		0
/(Revenue	10	- · · · · · · · · · · · · · · · · · · ·							100,69	90		486,323	
, až	11										0		0
_	12		enue—add lines 8 through 1						6.2	202,10		2.	121,614
	13		and similar amounts paid (86,31			839,746
•	14		paid to or for members (P			1					0		0
ø	15		other compensation, emplo			A), lines 5–10)					0		0
Expenses	16a		onal fundraising fees (Par			,					0		0
. ed	b		ndraising expenses (Part Í			['] 35	5,500	1.4		-	7 4 3		120
ш	17		penses (Part IX, column (<i>i</i>				93,66	35		104,911
	18	Total ex	penses Add lines 13-17 (must equa	Part IX, column (A	A), line 25)			1,1	79,97	75		944,657
	19	Revenu	e less expenses Subtract	line 18 fror	<u>n l</u> ine 12				5,0	22,13	32	1,	176,957
9 or								Beginn	ing of Curre	ent Yea	ır	End of Yea	r
Net Assets Fund Balanc	20		sets (Part X, line 16)							85,61		17,	354,107
ag B	21		bilities (Part X, line 26)							39,85			4,898
			ets or fund balances Subt	ract line 21	from line 20				15,4	45,75	56	17,	349,209
	<u>rt II</u>		nature Block		-								
and i	er penari belief it i	ies of perjury is true, corre	y, I declare that I have examined to ct, and domplete Declaration of p	nis return, incl Fenarer (other	uding accompanying sch than officer) is based or	hedules and state n all information o	ements of which	, and to th	ne best of my r has any kno	knowie	edge e /		
		1 1			than officer) is based of	T an information c	71 WITHOU	Грісраїс	Thas any lak	Swicage		7/3	
Sign		 	Signature of officer	/_					Date	- 7	13/20	12	
He	re		William G Rosenberg	/			Pres	ident	20				
			Type or print name and title					140111					
		Print	/Type preparer's name		Preparer's signature			Date	e			PTIN	
Pai	d									Check			
	parer	- Jan	es Bennett		James Bennett			4/	19/2013		mployed	P004475	47
	e Only		's name ► Bennett & Ass	ociates CP	As PLLC				Firm's EIN	▶ 27	-348812	8	
			's address ► 100 Huronviev	v Blvd, Ann	Arbor, MI 48103				Phone no	(73	34) 622-7	7000	
May	the IF	RS discus	s this return with the prepa	arer shown	above? (see instru	uctions)						X Yes	No
					*								

Form 99	Fund for the European University at St. Petersburg	59-3780793	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission		
	To provide financial support through greate for advisational repeated, and administrative		
	programs in the social sciences and humanities at the European University at St		
	Petersburg, Russia		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
		1es	<u> </u>
	If "Yes," describe these changes on Schedule O		
	Describe the organization's program service accomplishments for each of its three largest program services		
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(4) organizations are required to report the amount of grants and allowed the section 501(c)(4) organization for the section 501(c)(4) organization for the section 501(c)(4) organization for the section for the section 501(c)(4) organization for the section for the s	ocations to others	•
	the total expenses, and revenue, if any, for each program service reported		
	(Code) (Expenses \$ 125,927 including grants of \$ 125,927) (Revenu		
	Grant to the European University at St. Petersburg to support the institutional and program costs		
46	/Codo \/\(\Gamma\) /Funonces & FCE F24 including greats of & FCE F24 \/\(\Gamma\)/Poveru	o ¢	
	(Code) (Expenses \$ 565,534 including grants of \$ 565,534) (Revenu	еф	/
	Grants to the European University at St. at Petersburg to meet regular program neds. These grants		
	were used to support the University's 2012-2013 budget		

4c	(Code) (Expenses \$ 70,000 including grants of \$ 70,000) (Revenu	e \$)
	Grants to the European University at St. Petersburg to support Coca-Cola Professorships		
			
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 96,630 including grants of \$ 78,285) (Revenue \$	0)	
4-	Total manuscript expenses A 959,001		

Fund for the European University at St. Petersburg
Checklist of Required Schedules Form 990 (2012) Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		×
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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		
_	Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		<u> </u>
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			Ì
40	negotiation services? If "Yes," complete Schedule D, Part IV	9_	<u>X</u>	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			,
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		X
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			 ^-
	Schedule D, Parts XI and XII	12a	х	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	47		"
18	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		<u> </u>
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ь

19? Note. All Form 990 filers are required to complete Schedule O

	90 (2012) Fund for the European University at St. Petersburg	59-3780793	P	age 4
Part Part	Checklist of Required Schedules (continued)		1	
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	04		
~~	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	1 22		
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_ X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the]		
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		 ^
2 4 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines]		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1-1-		
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	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		Ιx
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, of	or		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part I	/ 26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	43	s Hi	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	الْمُرِّدُّةِ الْمُمْدِّدُ		Ě
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			١
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			,
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		
31	conservation contributions? If "Yes," complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	3.		 ^
-	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	1		
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		Х
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			1

•	0	 1-0	,			' '
		 ,		<u> </u>	-	

_		<u>80793</u>	P	age 5
Par				
	Check if Schedule O contains a response to any question in this Part V	•		<u> </u>
4-	Fatastha number consisted in Day 2 of Farm 4000 Fatas 0 of not analyzable	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable.	쒸		
C	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 2a	ol		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1
	account)?	4a	<u> </u>	X
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	ļ		<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	1		
_	gifts were not tax deductible?	6b	}	-
7	Organizations that may receive deductible contributions under section 170(c).		ŀ	«
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			X
h	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	-	 ^ -
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10	<u> </u>	
С	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	1,0	 -	 ^
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	 ^
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	-	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		····	···
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.	20 m ma		
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person? .	9b		X
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders 11a	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 504(a)(20) qualified pages 154 hough increases in great in the section 504(a)(20) qualified pages 154 hough increases in great in the section 504(a)(20) qualified pages 154 hough increases in great in the section 504(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(\dashv		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		-
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	138		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
J	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	\dashv		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	Ϊ́

Part VI

Fund for the European University at St. Petersburg 59-3780793 Page 6

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

Sect	ion A. Governing Body and Management				<u> </u>				
	off the Coverning Boar, and management			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 6	; <u> </u>						
	If there are material differences in voting rights among members of the governing body, or		1						
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O				i				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 6	3].				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations		1		Ì				
_	any other officer, director, trustee, or key employee?		2		X				
3	Did the organization delegate control over management duties customarily performed by or under t	he direct	<u> </u>						
•	supervision of officers, directors, or trustees, or key employees to a management company or othe		3		x				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		X				
5			5		X				
6	9 9, 9								
7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or	annoint	6		X				
/a	one or more members of the governing body?	арропп	7a		×				
h	Are any governance decisions of the organization reserved to (or subject to approval by) members		1ª	-	 ^-				
b			7b		×				
	stockholders, or persons other than the governing body?	a di ma	10		-				
8	Did the organization contemporaneously document the meetings held or written actions undertaken	i during	1		3 `				
2	the year by the following The governing body?		8a	X	i				
a			8b	X	\vdash				
b	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	achad	90	 ^- -	\vdash				
9	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	acned	9		×				
Saat		Internal Payonya							
Seci	ion B. Policies (This Section B requests information about policies not required by the	internal Neveriue	COUE.	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a		X				
	If "Yes," did the organization have written policies and procedures governing the activities of such of	hanters	1.00						
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo		11a	Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	io illing the lotti	1						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g	ive rise to conflicts?	12b	X					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "								
·	describe in Schedule O how this was done		12c	х					
13	Did the organization have a written whistleblower policy?		13		Х				
14	Did the organization have a written document retention and destruction policy?		14		X				
15	Did the process for determining compensation of the following persons include a review and appro-	val by			1				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation								
а	The organization's CEO, Executive Director, or top management official		15a		X				
b	Other officers or key employees of the organization		15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			<u> </u>					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement			1 1				
	with a taxable entity during the year?		16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe				i				
	the organization's exempt status with respect to such arrangements?		16b	[
Sect	on C. Disclosure			_					
17	List the states with which a copy of this Form 990 is required to be filed ► MI								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	0-T (Section 501(c)(3	s)s only	y)					
	available for public inspection. Indicate how you made these available. Check all that apply								
		plaın ın Schedule O)							
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 during the tax year								
20	State the name, physical address, and telephone number of the person who possesses the books								
	organization William Rosenberg	(734) 769-3	064						
	1825 Encore Lane, Ann Arbor, MI 48103								

Form 990 (2012)	Fund for the European University at St. Petersburg	59-3780793	Page 7				
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated						
	Employees, and Independent Contractors Check if Schedule O contains a response to any question in this Part VII .						
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees						

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	òох,	unles er and	Pos neck ss pe d a d	rson	n oth structure in sort employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Prof William G Rosenberg	1 00									
President	0 00	х		х						
(2) Prof Harley Balzer	1 00									
Treasurer	0 00	X		X						_
(3) Prof Gail Lapidus	1 00									
Secretary	0 00	Х		Х						
(4) Prof Loren Graham	1 00									
Director	0 00	х								
(5) Wm Newton-Smith	1 00							-		
Director	0 00	X			l					_
(6) Rector Oleg Kharkhordin	1 00									
Director	0 00	Х			<u> </u>					
	·									
(8)										
(9)								- "		·
(10)										
(11)										
(12)			_						-	
(13)										
(14)										

Page 8

	(A) Name and title	(B) Average hours per week (list any	box,	unles er_an	Pos neck ss pe	rson	than o	an ee)	(D) Reportable compensation	(E) Report compens	able sation		(F) stimated nount o	
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rel organiza (W-2/1099	itions	fi org an	other pensati om the anizatio d relate	on d
(15)														
(16)														
(17)						ļ						·		
(18)						_								
(19)													<u> </u>	
(20)												_		
(21)														
(22)														
(23)														
(24)														
(25)											_			-
1b c	Sub-total Total from continuation sheets to Part VII, Se	ection A		<u> </u>				>	0		0			0
d	Total (add lines 1b and 1c)	scuon A						•	0		0			0
2	Total number of individuals (including but not lir reportable compensation from the organization		ted a	bov	е) и 0	/ho	recer	ved	more than \$100	,000 of				
3	Did the organization list any former officer, dire employee on line 1a? <i>If</i> "Yes," complete Sched				oye	e, o	r high	nest	compensated			3	Yes	No X
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual									ל		4		X
5	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye									ridual		5		X
Sec	tion B. Independent Contractors	es, complete oc	neuu	10 0	101	Suc	ii pei	3011				<u> </u>		^
1	Complete this table for your five highest compe compensation from the organization Report co year	•										ax		
	(A) Name and business addi	ess			-				(B) Description of ser	vices	c	(C)		
														0
														<u>0</u> 0
				_										0
											Property Cal	· · · · · · · · · · · · · · · · · · ·	e. com since.	0
2	Total number of independent contractors (included more than \$100,000 of compensation from the	-	ed to ►	tno	se li	ste	abo 0	ve)	wno received		No.		*40	

Total revenue. See instructions

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (C) (D) (B) Total revenue Related or Unrelated Revenue business excluded from exempt tax under sections function revenue 512, 513, or 514 revenue Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1b Membership dues 0 c Fundraising events 1c 0 1d 0 d Related organizations Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 1,635,291 Noncash contributions included in lines 1a-1f. Total. Add lines 1a-1f 1,635,291 **Business Code** Program Service Revenue 0 2a 0 0 d 0 0 f All other program service revenue 0 0 Total. Add lines 2a-2f Investment income (including dividends, interest, and 408,128 other similar amounts) 408,128 Income from investment of tax-exempt bond proceeds 0 0 5 Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) 0 (II) Other 7a Gross amount from sales of (i) Secunties assets other than inventory 2,364,615 0 b Less cost or other basis and sales expenses 2,286,420 78,195 c Gain or (loss) 0 78,195 Net gain or (loss) 78,195 Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses 0 c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 а 0 **b** Less direct expenses 0 b c Net income or (loss) from gaming activities n 10a Gross sales of inventory, less returns and allowances а b Less cost of goods sold b 0 Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11a 0 0 0 C 0 All other revenue 0 Total. Add lines 11a-11d

486,323

0

2,121,614

Form 9	90 (2012) Fund for the European University at St Pe	etersbu <u>rg</u>		59-378	0793 Page 10
Par	t IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all	columns All other or	rganizations must co	omplete column (A)	
	Check if Schedule O contains a response to any	question in this Part	IX		
	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			
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				3
	organizations, and individuals outside the				,
	United States See Part IV, lines 15 and 16	839,746	839,746		,
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,	ا			
_	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ا			
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include	ا			
•	section 401(k) and 403(b) employer contributions)	0			
9 10	Other employee benefits Payroll taxes	0			
11	Fees for services (non-employees)	· ·			
' a	Management	l ol			
a b	Legal	0			
C	Accounting	7,046		7,046	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0	ž		
f	Investment management fees	27,532		27,532	-
g	Other (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O)	35,500			35,500
12	Advertising and promotion	0			
13	Office expenses	710		710	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	16,012		16,012	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0			*
24	Other expenses Itemize expenses not covered				*
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column				*
	· · · · · · · · · · · · · · · · · · ·				
-	(A) amount, list line 24e expenses on Schedule O) Subscription for EU library	18,345	18,345		
a b	Meanypapage	-234	10,040	-234	
C		0		-204	
d		0			
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	944,657	858,091	51,066	35,500
26	Joint costs. Complete this line only if the	244,007	200,001	2,,230	
_ =	organization reported in column (B) joint costs				

from a combined educational campaign and

fundraising solicitation Check here following SOP 98-2 (ASC 958-720)

Form 990 (2012)

		Check if Schedule O contains a response to	any question in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	•	45,396	1	47,617
	2	Savings and temporary cash investments		150,709	2	32,215
	3	Pledges and grants receivable, net		5,642,711	3_	
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and for	rmer officers, directors,			* .
		trustees, key employees, and highest compensa	ated employees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified person	ns (as defined under section	,		?
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contributing employers and	·		á
	}	sponsoring organizations of section 501(c)(9) voluntary e	mployees' beneficiary			j,
ets		organizations (see instructions) Complete Part II of Sche		6		
Assets	7	Notes and loans receivable, net		0	7	0
⋖	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		15,980	9	
	10a	Land, buildings, and equipment cost or		, *	٩	zir ,
		other basis Complete Part VI of Schedule D	10a 0			
	b	Less accumulated depreciation	10b 0	0	10c	0
	11	Investments—publicly traded securities		10,130,816	11	17,204,275
	12	Investments—other securities See Part IV, line	11	0	12	0
	13	Investments—program-related See Part IV, line	11	0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		0	15	0
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	15,985,612	16	17,354,107
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		539,856	18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete F	Part IV of Schedule D		21	4,898
es	22	Loans and other payables to current and former	officers, directors,	& M & A	ąà	., • 4 • 1 • \$
Liabilities		trustees, key employees, highest compensated	employees, and	<u> </u>		<u> </u>
ap		disqualified persons Complete Part II of Schedu	ıle L		22	
_	23	Secured mortgages and notes payable to unrela	ited third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated	d third parties	0	24	0
	25	Other liabilities (including federal income tax, pa	•			
		parties, and other liabilities not included on lines	17-24) Complete			
		Part X of Schedule D		0	25	0
	26_	Total liabilities. Add lines 17 through 25		539,856	26	4,898
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
Ses		complete lines 27 through 29, and lines 33 ar	id 34.			
ā	27	Unrestricted net assets		-333,651	27	71,488
Bal	28	Temporarily restricted net assets		713,361	28	211,575
힏	29	Permanently restricted net assets		15,066,046	29	17,066,146
Net Assets or Fund Balances	1	Organizations that do not follow SFAS 117 (ASC958),	check here			
5		-	check here			
ts (00	complete lines 30 through 34.				
Se	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or ed	· · ·		31	· ·
ét	32	Retained earnings, endowment, accumulated in	come, or other funds	45 445 750	32	47.040.000
_	33	Total net assets or fund balances		15,445,756		17,349,209
	34	Total liabilities and net assets/fund balances		15,985,612	34	17,354,107

Form 9	990 (2012) Fund for the European University at St. Petersburg	5	9-3780793	Pag	_{je} 12
Part	t XI Reconciliation of Net Assets		-	-	
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	2,121	,614
2	Total expenses (must equal Part IX, column (A), line 25)	2		944	,657
3	Revenue less expenses Subtract line 2 from line 1	3		1 <u>,17</u> 6	3,95 <u>7</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15		5,75 <u>6</u>
5	Net unrealized gains (losses) on investments	5		726	3,496
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1	7,349	9,209
Part					_
	Check if Schedule O contains a response to any question in this Part XII			•	<u></u>
			,	Yes	No
1	Accounting method used to prepare the Form 990 CashX Accrual Other	_	_	~{ ^ ,	1 :
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				. 🖫
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both			4.0	
	Separate basis Consolidated basis Both consolidated and separate basis				2 m/2
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		* 4	.132	
	separate basis, consolidated basis, or both			. 34	
	X Separate basis Consolidated basis Both consolidated and separate basis				¥
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight o	f			
•	the audit, review, or compilation of its financial statements and selection of an independent accountant?	•	2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				*
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Fund for the European University at St Petersburg

Employer identification number

59-3780793

Pai	rt I	Reason	for Public Ch	arity Status (All org	ganizatio	ns must	complete	this par	rt) See i	nstructio	ns		_
The	orgar	nization is not	a private founda	tion because it is (For	lines 1 th	rough 11,	check onl	y one box	()				
1		A church, co	nvention of churc	ches, or association of	churches	described	l ın sectio	n 170(b)((1)(A)(i).				
2		A school des	cribed in sectio i	n 170(b)(1)(A)(ii) . (Atta	ich Sched	ule E)							
3		A hospital or	a cooperative ho	ospital service organiza	ation desc	ribed in s e	ection 17	D(b)(1)(A)	(iii).				
4	同	A medical re	search organizat	tion operated in conjun	ction with	a hospital	describe	d in sectio	on 170(b)	(1)(A)(iii)	. Enter t	he	
			me, city, and sta			•			` '				
5		An organizat	ion operated for	the benefit of a college	or univer	sity owne	d or opera	ited by a	governme	ntal unit o	describe	d	
		_	•	Complete Part II)		•		,	•				
6		A federal, sta	ate, or local gove	rnment or government	al unit des	scribed in	section 1	70(b)(1)(<i>i</i>	A)(v).				
7	ಠ		_	receives a substantial					• • •	rom the g	eneral p	ublic	
	_	-	•	1)(A)(vi). (Complete Pa	-	,-,-				J	·		
8		A community	trust described	ın section 170(b)(1)(A	.)(vi). (Cor	mplete Pa	rt II)						
9		_	-	receives (1) more that			•						3
		•		d to its exempt function	-		-						
			_	nt income and unrelate			-) from bus	sinesses	;	
	$\overline{}$		_	after June 30, 1975 S									
10	\vdash	•	<u>-</u>	nd operated exclusively		•	•						
11	X	_	-	nd operated exclusively			-			-		4.	
			•	olicly supported organiz								ction	
		_		t describes the type of									
	_	a Type			e III–Funct	-	_		ype III-N		•	egrate	a
е	X	X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section											
				=	than one	or more p	ublicly sur	oported oi	rganizatio	ns descri	bed in s	ection	
_			section 509(a)(2				_						
f		_		written determination	from the I	RS that it	is a Type	ı, Type II,	or Type II	I supporti	ng		_
_		-	, check this box	he organization accept	lad any ail	ft or contr	hutian fra	m any of t	tha				L
g		following per		ne organization accept	eu any gn	it or contin	DULION NO	ili aliy Oi i	uic				
				or indirectly controls, e	ither alone	e or togeth	er with pe	ersons de	scribed in	(u)		Yes	No
			•	erning body of the sup		•	•			(/	11g(i)		Х
		•		person described in (i)		•			•	•	11g(ii)		Х
		(iii) A 35%	controlled entity	of a person described	l ın (ı) or (ı	וו) above?					11g(iii)		Х
h		Provide the f	ollowing informa	tion about the support	ed organiz	zation(s)							
(i)		of supported	(ii) EIN	(iii) Type of organization		organization		ou notify		Is the	(vii) Am	ount of mo	onetary
	orga	anization		(described on lines 1–9 above or IRC section		sted in your document?		nzation in of your	1	tion in col ized in the	İ	support	
				(see instructions))			sup	oort?	U	S?	_		
		_			Yes	No	Yes	No	Yes	No	<u> </u>		
(A)										İ			
	<u>pean</u>	University at		7	<u> </u>		X		X	X		83	9,746
(B)									Ì	1			
(C)			·-· ·	· -	-		l I		 	1	 		
(C)													
(D)						1		<u> </u>	 		 		
ν-,							<u> </u>						
(E)													
									<u> </u>	<u> </u>			
.													0 740
Total		7	i .	I .	1	1	I	1	1	1	1	0.3	9,746

instructions

Par	(Complete only if you checked the Part III_If the organization fails to	box on line 5	, 7, or 8 of P	art I or if the	organization f	ailed to qualify	
Sec	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						0
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on				:		
	ıts behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by each					,	
	person (other than a governmental unit	`	*	*	\$	4< ,	
	or publicly supported organization)	,		: 4.			
	included on line 1 that exceeds 2%	[% ^ *		,	, ,	
	of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	- 17		1		, , , , , , , , , , , , , , , , , , , ,	0
	ion B. Total Support				·		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	0	0		1		0
8	Gross income from interest, dividends,			 		 	
J	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						0
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on						0
10	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV)						0
11	Total support. Add lines 7 through 10		^> <u>k</u>	1		**	0
12	Gross receipts from related activities, etc. (see	•				12	
13	First five years. If the Form 990 is for the org	ganızatıon's first	t, second, third	l, fourth, or fifth	tax year as a s	ection 501(c)(3)	
	organization, check this box and stop here						▶ [_]
Sect	ion C. Computation of Public Support					,	
14	Public support percentage for 2012 (line 6, co			olumn (f))		14	0 00%
15	Public support percentage from 2011 Schedu					15	0 00%
16a	33 1/3% support test—2012. If the organiza				14 is 33 1/3%	or more, check	this box
L	and stop here. The organization qualifies as				d l 45 22 4	1/20/	□
b	33 1/3% support test—2011. If the organiza				a line 15 is 33 1	1/3% or more, c	neck this
	box and stop here. The organization qualifie		• •				
17a	10%-facts-and-circumstances test—2012. is 10% or more, and if the organization meets Part IV how the organization meets the "facts"	s the "facts-and-	-circumstances	s" test, check th	is box and sto	p here. Explain	
	organization						▶□
b	10%-facts-and-circumstances test—2011.	_					
	15 is 10% or more, and if the organization me						ain in
	Part IV how the organization meets the "facts	s-and-circumsta	nces" test. The	e organization q	ualifies as a pu	iblicly	. —
	supported organization .						▶∟
18	Private foundation. If the organization did no	ot check a box of	on line 13, 16a	, 16b, 17a, or 1	7b, check this b	oox and see	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons				333		0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the				;		
_	amount on line 13 for the year Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6)						0
Sec	tion B. Total Support	va va. 1.					
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	0	0	0	0	o	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,				,		
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
С	Add lines 10a and 10b	o	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	<u> </u>	0	<u> </u>	0	0]	0
14	First five years. If the Form 990 is for the organization, check this box and stop here		nd, third, fourth,	or fifth tax year a	s a section 501(c)(3) 	▶ 🗌
	tion C. Computation of Public Support					1 de 1	0.000:
15	Public support percentage for 2012 (line 8, column		e 13, column (f))			15	0 00%
16 See	Public support percentage from 2011 Schedule A, I					16	0 00%
<u> 3ec</u> 17	tion D. Computation of Investment Inco			mn (f))		17	0 00%
18	Investment income percentage for 2012 (line 10c, Investment income percentage from 2011 Schedul	• •	-	(1 <i>))</i>		18	0 00%
19a	33 1/3% support tests—2012. If the organization			and line 15 is m	ore than 33 1/3%		
b	not more than 33 1/3%, check this box and stop his 33 1/3% support tests—2011. If the organization	ere. The organiza	ation qualifies as	a publicly suppo	orted organization	n	▶ 🗀
-	line 18 is not more than 33 1/3%, check this box ar						▶□
20	Private foundation. If the organization did not che	-					▶□

	990 or 990-EZ) 2012	Fund for the	<u>European Univer</u>	sity at St_Petersbui	rg	<u>59-3780793</u>	Page 4
Part IV	Supplemental	Information.	Complete this	part to provide th	ne explanations required	by Part II, line	10;
	Part II. line 17a	or 17b. and F	Part III. line 12	Also complete th	us part for any additional	information. (See
	instructions)		,		,	`	
	inoti dottorio)						
							.
							
							
	-					·	
							
- 							

SCHEDULE D · (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

Fund	for the European University at St. Petersburg		59-3780793
Pari	Organizations Maintaining Done	or Advised Funds or Other Similar	Funds or Accounts. Complete if
	the organization answered "Yes" t		·
	······································	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)	_	
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do	nor advisors in writing that the assets held	in donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, done		
	used only for charitable purposes and not for		
	purpose conferring impermissible private ben		Yes No
Part	- · · · · · · · · · · · · · · · · · · ·	lete if the organization answered "Ye	es" to Form 990 Part IV line 7
4			
7	Purpose(s) of conservation easements held t	· — · — · — — · · · · · · · · · · · · ·	and the broken calls are not been been
	Preservation of land for public use (e g , recr	· =	on of an historically important land area
	Protection of natural habitat	Preservation	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizat	on held a qualified conservation contribut	ion in the form of a conservation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation ease	ements	2b
С	Number of conservation easements on a cert	ified historic structure included in (a)	2c
d	Number of conservation easements included	in (c) acquired after 8/17/06, and not on a	ı
	historic structure listed in the National Registe	er	2d
3	Number of conservation easements modified	transferred, released, extinguished, or te	rminated by the organization
	during the tax year		
4	Number of states where property subject to c	onservation easement is located	
5	Does the organization have a written policy re	egarding the periodic monitoring, inspection	on, handling of
	violations, and enforcement of the conservati	on easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation	n easements during the year
	>		
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation eas	sements during the year
	▶ \$		
8	Does each conservation easement reported of	on line 2(d) above satisfy the requirements	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No
9	In Part XIII, describe how the organization re		
	balance sheet, and include, if applicable, the		nancial statements that describes
D-	the organization's accounting for conservation		
Part		ns of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under	r SFAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other sim		
	of public service, provide, in Part XIII, the tex		
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other sim		ation, or research in furtherance
	of public service, provide the following amount		
	(i) Revenues included in Form 990, Part VIII,	line 1	> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of a	art, historical treasures, or other similar as	sets for financial gain, provide the
	following amounts required to be reported un	der SFAS 116 (ASC 958) relating to these	eitems
а	Revenues included in Form 990, Part VIII, lin	e 1	▶ \$
b	Assets included in Form 990, Part X		▶ \$

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Other

0

0

0

Part VII	Investments—Other Se	curities. See Form 990, Part X,	line 12	
((a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year	
(1) Financia	al derivatives	_ 0		
	held equity interests	0		
(3) Other				
<u>(A)</u>				
<u>(B)</u>				
(C)				
<u>(D)</u>				
(E)				
(F)				
(G) (H)				
(l)			-	
	b) must equal Form 990, Part X, col (B) line 12) ▶ 0		
Part VIII		Related. See Form 990, Part X	, line 13	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	
(2)				
(3)				
_(4)				
(5)				
(6)				
(7)				
(8)				
<u>(9)</u> (10)				
	b) must equal Form 990, Part X, col (B) line 13) > 0	6 · 1 · 1 · 3 · 4 · 4	(s) (s) (s)
Part IX	Other Assets. See Form			· · · · · · · · · · · · · · · · · · ·
		(a) Description		(b) Book value
(1)				,
(2)	·			_
(3)				
(4)		-		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	ımn (b) must equal Form 990, Pa	ort V. col. (B) line 15.)		
Part X	Other Liabilities. See F			l
1.	(a) Description of liability	(b) Book value		
	al income taxes	0		٠
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		-		
(10)				
(10) (11)	b) must equal Form 990, Part X, col (B) line 25	0		

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sched	ule D (Form 990) 2012 Fund for the European University at St Petersburg			59-3780793	Page 4
Pari		nts W	ith Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements			1	2,848,110
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	726,496		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	726,496
3	Subtract line 2e from line 1			3	2,121,614
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b		1	
С	Add lines 4a and 4b			4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,121,614
Par		ents V	Vith Expenses p	er Return	
1	Total expenses and losses per audited financial statements			1	944,657
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1,	
C	Other losses	2c		1 1	
d	Other (Describe in Part XIII)	2d		1	
e	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	944,657
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b		1	
C	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	944,657
	XIII Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	- III lun	es 1a and 4. Part IV	/ lines 1h and	2h:
	/, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also				20,
	r, line 4, Fart A, line 2, Fart AI, lines 2d and 4b, and Fart AII, lines 2d and 4b Also onal information	Comp	nete this part to prov	ride arry	
auditi	ona momaton				
Part I	V Line 2b Hold federal grants and other form of aids from U.S. Department of				
					·
Educ	ation and distribute to students at the European University at St. Petersburg				
	······································				
	•••••••••••••••••••••••••••••••••••••••				

Schedule D (Form 990)		und for the Eu	ropean Univer	sity at St_Pet	ersburg			59-3780793	Page 5
Part XIII S	Suppleme	ental Inform	ation (contil	nued)					-
<u> </u>	•			-	_				
						·			
							 -		
									
									
			·						
								·	

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047 20**12**

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

► See separate instructions.

Open to Public Inspection

Employer identification number Name of the organization Fund for the European University at St. Petersburg 59-3780793 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award X Yes No the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total offices in the employees, region (by type) (e g , a program service, expenditures for fundraising, program describe specific type of and investments region agents, and independent services, investments, service(s) in region in region contractors grants to recipients located in the region) in region (1) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17)3a Sub-total 0 0 **b** Total from continuation sheets to Part I 0 0 0

0

0

0

C Totals (add lines 3a and 3b)

59-3780793

Fund for the European University at St Petersburg Schedule F (Form 990) 2012

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, . (i) Method of (h) Description Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed (g) Amount of (f) Manner of (e) Amount of (d) Purpose of (c) Region (b) IRS code (a) Name of

organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuaton (book, FMV, appraisal, other)
(1)		Russia and the Newly Institutional support Independent States	Institutional support	125,927	125,927 Wire transfer			
(2)		Russia and the Newly General Independent States	General programs	565,534	565,534 Wire transfer			
(3)		Russia and the Newly Professorship Independent States	Professorship	70,000	70,000 wire transfer			
(4)		Russia and the Newly Student tuition Independent States	Student tuition	2,500	2,500 Wire transfer			
(5)		Russia and the Newly Student travel Independent States	Student travel	785	785 wire transfer			
(9)		Russia and the Newly Finanical Independent States	Finanical support	75,000	75,000 wire transfer			
(2)								
(8)								
(6)								
(10)	:							
(11)								
(12)								
(13)								
(14)								
(15)								:
(16)								

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

Enter total number of other organizations or entities က

Schedule F (Form 990) 2012

Fund for the European University at St. Petersburg

Schedule F (Form 990) 2012

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed

59-3780793

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance E (2) (12) 13 (14) (15) 5 (18) ව **Đ** 9 9 3 **®** 6 (10 <u>=</u> 16

Par	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)

Yes X No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)

Yes X No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)

Yes X No

Schedule F (Fo	mm 990) 2012 Fund for the European University at St. Petersburg	<u>59-3780793</u>	Page 5
Part V	Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds), (accounting method, amounts of investments vs expenditures per region) Part II, line 1 (accounting method), and Part III, column (c) (estimated number of recipients), as applicable provide any additional information (see instructions)	counting method), Part III	to
Part I Line 2	2 The Board of Directors meets twice a year at the European University at St		
Petersburg,	3 Gagarinskala Street, St. Petersburg, Russia, and hears detailed reports from		
the Universi	ty's Rector and Finance Director concerning the use of the grants allocated by		
the Fund of	the University In addition, the Rector of the European University sits as a		
member of	the Fund's Board of Directors and communicates regularly to the Board concerning		
the use of the	ne Fund's grants Four other members of the Fund's six member Board of		
		-	
University's	Board of Trustees and attend its meeting in June and December		
	······································		
		- -	·
		·	
			- -
		·	
			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047
2012

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Form 990 or 990-EZ or to provide any addition

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Fund for the European University at St. Petersburg	59-3780793
Form 990, Part III, Line 4d Program Service Expenses 96,630, Grants and allocations:	
78,285, Revenue 0 Grants to the European University at St. Petersburg to support the	
academic programs, Subscription for EU Library, etc	
Form 990 Part VI Section B Line 11b A draft copy of Form 990 is reviewed by the Board	
President before being filed	
Form 990 Part VI Section B Line 12c The Board requires statements twice a year at its Board	
meeting from directors reviewing their activities and affirming adherence to the Fund's	
policy	
Form 990 Part VI Section C Line 19 The organization makes all of its governing documents	
available to the public by request	

Name of the organization	Employer identification number
Fund for the European University at St. Petersburg	59-3780793
Tana for the European Officerotty at other dictionary	100 0100.00
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