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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements. , 2012, and ending For the 2012 calendar year, or tax year beginning Jul 1 C Name of organization D Employer Identification Number Check if applicable Yale University Elizabethan Club Corp Address change Doing Business As 06-0332975 Number and street (or P O box if mail is not delivered to street addr) Telephone number Name change Initial return 459 College Street (203) 432-0172 City, town or country State ZIP code + 4 Terminated **G** Gross receipts \$ 612,460 Amended return New Haven CT06511 H(a) Is this a group return for affiliates? Application pending F Name and address of principal officer H(b) Are all affiliates included?
If 'No,' attach a list (see instructions) No Stephen Parks 44 Temple Court New Haven CT 06511 Tax-exempt status X |501(c)(3) 501(c) ((insert no) 4947(a)(1) or 527 Website: ► H(c) Group exemption number Form of organization X Corporation Trust Association L Year of Formation 1911 M State of legal domicile CT Part I Summary Briefly describe the organization's mission or most significant activities: Literary club: The promotion among its membership and the Yale University community Activities & Governance of a larger appreciation of literature Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 6 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 3 Total number of volunteers (estimate if necessary) 6 <u>26</u> 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) $\overline{611},735.$ 611,870 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 2. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 249 139. Total revenue - add lines 8 through 11 (must equal Part VIII column (A) time 12) 612,121 12 611,876. Grants and similar amounts paid (Part IX, column (A), lines 1.3) 41,188. 38,743. Benefits paid to or for members (Part IX, column 63), line 4)
Salaries, other compensation, employee benefits Part X, column (A2016)s 14 130,321 101,824. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D) line 25 CDEN Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 295,697 217,177. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 467,206. 357,744. 19 Revenue less expenses Subtract line 18 from line 12 144,915. 254,132. **End of Year Beginning of Current Year** 20 Total assets (Part X, line 16) 3,754,907 4,009,048. 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 3,754,907. 4,009,048. Part II |Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 13 mm 2013 Signature of officer Sign Here Stephen Parks Director, Chair Type or print name and title Print/Type preparer's name Check И Shawn L. O'Sullivan self-employed P00195799 Paid Preparer Firm's name DAVIS O'SULLIVAN PRIEST, Use Only Firm's EIN 27-1065109 Firm's address 129 CHURCH ST STE 503 NEW HAVEN CT06510 (203) 865-5990

May the IRS discuss this return with the preparer shown above? (see instructions)

Parl	: !!!	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				
	See	statement attached to Schedule O:				
		promotion among its membership and the Yale University community				
		a larger appreciation of literature.				
	5 T G	a larger appreciation of interactive.				
2	Did th	e organization undertake any significant program services during the year which were not listed on the prior				
				V	[]	N.
		990 or 990-EZ?	L	Yes	X	No
		s,' describe these new services on Schedule O				
3		e organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X	No
		s,' describe these changes on Schedule O.				
4	Descr	be the organization's program service accomplishments for each of its three largest program services, as mea	sured	by exp	ense	5
	others	on 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gra is, the total expenses, and revenue, if any, for each program service reported	nts an	a alloc	ations	ιο
	041010	, the total expenses, and revenue, if any, for each program out too topolitic				
) (F			1 0	
4 a	(Code					
	<u>See</u>	Schedule O for details				
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		·				
			. – – –			
4 b	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
			- – – -			
4 0	(Code	e·) (Expenses \$ including grants of \$) (Revenue	\$)
			 -	- - -		_ .
			- -			
						
			- ·			·
				-		
4	d Othe	r program services. (Describe in Schedule O)				
_	(Ехр	enses \$ including grants of \$) (Revenue \$)	
4	e Tota	program service expenses ► 357,744.				
				Ear	~ 000	(2012)

Form 990 (2012) Yale University Elizabethan Club Corp

06-0332975

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			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	х	
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		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		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	х	
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 negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
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, 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	11 a	х	
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	11 b		Х
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		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	11 d	х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	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	х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	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	14a		X
15		15		х
16		16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
- 1	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2012) Yale University Elizabethan Club Corp

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		X
t	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 to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
ŧ	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
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		х
	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):			
•	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
I	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28Ь		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		x
		23		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
	b If 'Yes' to line 35a, 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	_	х
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BA	A	Forn	990	(2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a n b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 h 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c Х 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2h 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? Х За **b** If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3h 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 account)? Х 4 a **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. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 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 as charitable contributions? Х 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b Organizations that may receive deductible contributions under section 170(c). a 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? 7 a Х **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 Х 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f $\overline{\mathbf{x}}$ g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h 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? Х Я 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? X 9 a X b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11_b 12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? X 14a b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 14b

Form 990 (2012) Yale University Elizabethan Club Corp 06-0332975 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 X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 X Did the organization have members or stockholders? 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? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 a X Х b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10 a Did the organization have local chapters, branches, or affiliates? Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 give rise 12b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c Х 13 Х 13 Did the organization have a written whistleblower policy? Х 14 Did the organization have a written document retention and destruction policy? 14 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? 15a Х a The organization's CEO, Executive Director, or top management official 15b Х **b** Other officers of key employees of the organization 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 Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization

459 College Street

BAA

New Haven

(203) 432 - 0172

orm 990 (2012)	Yale	University	Elizabethan	Club	Corp

06-0332975

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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

1 a 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 employees.'
- 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

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

F-1 check and box in heinter the organization			5	(C						
(A) Name and Title	(B) Average hours per	one box office	. ùnl	ess p	erson	r/trustee	an	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Stephen Parks	4.00									
Director Chair		Х						0.	0.	0.
(2) Marie Boroff	1.00									
Director	ļ	Х						0.	0.	0.
(3) Peter B. Cooper	1.00				ľ					
Director		Х						0.	0.	0.
_(4)_Charles_Ellis	1.00									
Director	<u> </u>	X						0.	0.	0.
(5) Richard Selzer	1.00									
Director		X						0.	0.	0.
(6) David F. Swensen	1.00	ļ					1			
Director		Х						0.	0.	0.
_(7) Anders Winroth	4.00	1								
President	<u> </u>			X			┞	0.	0.	0.
_(8) Eleanor Babbitt	2.00	_								
Vice President		<u> </u>	_	X			_	0.	0.	0.
(9) Jan Simpson	2.00	-							_	_
Grad Secretary/Treasurer				Х		ļ	↓	0.	0.	0.
(10) Max de la Bruyere	2.00	-	ļ		ĺ			_		
Undergrad Secretary	 	 	<u> </u>	X			-	0.	0.	0.
(11) Bonnie Antosh	2.00	-								
Undergrad Treasurer	-	<u> </u>		X			\vdash	0.	0.	0.
	-	1								
<u>(13)</u>										
(14)					-		-			

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Part VII Section A. Officers, Directors, True (A) Name and title	(B) Average hours per week	(do	not c	Pos heck ss pe	ition more rson direct	than o	one an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estir amount	(COTIL) nated of other ensation	
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from organ and r	n the	
15)												
16)							-					
17)												_
18)					<u> </u>							_
19)												_
20)												_
21)		-										
22)												_
23)		-										_
24)		-										
25)		-										_
1 b Sub-total	l	_!	'	<u> </u>		٠	<u> </u> ▶	0.	0.			0
c Total from continuation sheets to Part VII, Sect d Total (add lines 1b and 1c)	ION A						>	0.	0.			C
2 Total number of individuals (including but not lin from the organization ►	nited to the	se li	sted	abo	ove)	who	rece	eived more than \$	100,000 of reportab	le compe	ensation	1
											Yes	N
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for such as the second line in the second line is a second line in the second line in the second line is a second line is a second line in the sec	ctor or trus ch individua	tee, al	кеу	emp	oloye	ee, oi	r nig	gnest compensate	a employee	3	-	X
4 For any individual listed on line 1a, is the sum of the organization and related organizations great such individual	of reportabler than \$1:	e coi 50,00	тре 00?	nsa' If 'Y	tion 'es'	and o	othe <i>lete</i>	er compensation fr Schedule J for	om	4		Х
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Ye	ue compen	satio	n fre hed	om a Jule .	any J for	unrel such	ateo	d organization or i	ndıvıdual	5		X
Section B. Independent Contractors									en \$100,000 of			_
Complete this table for your five highest comper compensation from the organization. Report corr	nsated inden pensation	o for	the o	cale	nda	yea	r en	ding with or within	the organization's	tax year		
(A) Name and business ad	dress						_	Description	of services	Compe	s) nsation	
												_
												_
2 Total number of independent contractors (include	ding but no	t lımı	ted	to th	nose	liste	d at	bove) who receive	d more than			_
\$100,000 in compensation from the organizatio	n ►	TEE	40100		10413				· · · · · · · · · · · · · · · · · · ·	Form	990 (2	_

The state of the sections of the section of the sections of the sections of the sections of the section of the s		Check	if Schedule O	contains a respo	onse to any question	n in this Part VIII			
1 Federated campaigns 1 6 600.	· O	,	•				Related or exempt function	Unrelated business	
Total Aud lines (a-1)	ONTRIBUTIONS, GIFTS, GRANI AND OTHER SIMILAR AMOUNTS	 b Membersl c Fundraisi d Related o e Government f All other corsimilar amo 	hip dues ng events rganizations grants (contribution ntributions, gifts, g unts not included a	1 b 1 c 1 d 1 d rants, and above 1 f	563,160.				
Business Code Business Cod		h Total. Add	d lines 1a-1f	•	•	611,735.			
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents b Less: rental expenses c Rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 6 A Gross mount from sales of sost other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 7 a Gross amount from sales of sost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events y of contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less: cost of goods sold b Less: cost of goods sold c Net income or (loss) from sales of inventory 10 a Gross sales of inventory, less returns and allowances a 7.23, b Less: cost of goods sold c Net income or (loss) from sales of inventory 11 a	SRAM SERVICE REVENUE	b c d			Business Code	-			
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes 6a Gross rents b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other haiss and sales expenses c Gain or (loss) 6 Net yound or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other haiss and sales expenses c Gain or (loss) 6 Net gain or (loss) 7 a Gross income from fundraising events 6 or contributions reported on line 1c) 8 a Gross income from gaming activities 8 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities 8 c Net income or (loss) from gaming activities 9 a Gross sales of inventory, less returns and allowances 0 to the fundraising events 10 a Gross sales of inventory 11 a	8			e revenue					
(i) Personal (ii) Personal (iii) P		3 Investme other sim 4 Income fr	nt income (incl ilar amounts) om investment	_	bond proceeds	2.	2.	0.	0.
The across anount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss)		b Less [,] ren	tal expenses ne or (loss)		(ii) Personal		-		
Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		b Less cost of and sales e c Gain or (r than inventory or other basis expenses loss)	(i) Securities			·		
9 a Gross income from gaming activities See Part IV, line 19 b Less' direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less' cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d		8 a Gross ind (not inclused contribution) See Part b Less' dire	come from functions \$	d on line 1c)	b				
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a c d All other revenue e Total. Add lines 11a-11d									
and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a b c d All other revenue e Total. Add lines 11a-11d				om gaming activ					
Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d		and allow b Less: cos	vances st of goods sold	d	b 584.			_	
b c d All other revenue e Total. Add lines 11a-11d		M			1	139.	139.	0.	0.
c d All other revenue e Total. Add lines 11a-11d							<u> </u>	1	
e Total. Add lines 11a-11d		D				-			
		d All other	 revenue						
12 Total revenue. See instructions 611,876. 141. 0.					•				
		12 Total rev	enue. See inst	ructions		611,876.	141.	0.	. 0.

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (A)
Total expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII Program service Management and general expenses expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 37,743 37,743 Grants and other assistance to individuals in the United States. See Part IV, line 22 1,000 1,000 Grants and other assistance to governments. organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 82,986. 82,986 0. 0. Pension plan accruals and contributions (include section 401(k) and section 403(b) èmployer contributions) 0 18,838 18,838 0. Other employee benefits Payroll taxes Fees for services (non-employees): a Management **b** Legal c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees 9 Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O) 13,685 13,685 0 0. Advertising and promotion 13 Office expenses 23,321 23,321 0 0. Information technology 14 2,286. 2,286 0 0. 15 Royalties 16 Occupancy 0. 34,529 34,529 O 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 23 Other expenses ltemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Miscellaneous_____ 0__ 117 117 0 b House maintenance, repair 0 0 0 0. c & refurbishing 55,367 0. 55,367 0 d Grounds maintenance _ _ _ _ 22,951. 22,951 0 0_ e All other expenses 64,921. 64,921 0 0. 25 Total functional expenses. Add lines 1 through 24e 357,744. 357,744 0. 0. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation
Check here ► ☐ if following

SOP 98-2 (ASC 958-720)

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 1 314,599. 482,799. 2 Savings and temporary cash investments 2 3,372 2,475. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 1,764 8 5,629. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 1,545,875 b Less: accumulated depreciation 10b 1,475,797 10 c 1,545,875. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets See Part IV, line 11 15 1,959,375 1,972,270. 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,754,907 16 4,009,048 Accounts payable and accrued expenses 17 17 Grants payable 18 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 0 26 0. Organizations that follow SFAS 117 (ASC 958), check here ► 🛛 and complete lines 27 through 29, and lines 33 and 34. ASSETS 27 Unrestricted net assets 27 Temporarily restricted net assets 28 28 317,971 485,273. Permanently restricted net assets 29 29 3,436,936 3,523,775. e R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. FUZD 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 B 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 3,754,907 33 4,009,048. 34 Total liabilities and net assets/fund balances 3,754,907 34 4,009,048. BAA Form 990 (2012)

TEEA0111 01/03/13

	1 990 (2012) Yale University Elizabethan Club Corp	<u>06-033</u> 2975		Pa	ige 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6:	11,8	376.
2	Total expenses (must equal Part IX, column (A), line 25)	2			744.
3	Revenue less expenses. Subtract line 2 from line 1	3			32.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			907.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			9.
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	4,0	n9. ()48.
Pa	t XII Financial Statements and Reporting				. 101
	Check if Schedule O contains a response to any question in this Part XII				
	ensuran contesta o contesta a responso to any question in this rate All			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			103	
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2:	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both:	ewed on a			
	X Separate basis Consolidated basis Both consolidated and separate basis		!		
	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepbasis, consolidated basis, or both	arate			
	★ Separate basis				•
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c		х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3 a		х
	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3 b		
BAA			Form	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service • Name of the organization

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

Employer identification number

			zabethan Club						06-03		
Part				(All organizations					See in	structi	ons.
		· ·		it is. (For lines 1 through		-					
1	=	•		ation of churches descri		ection 1	7 0(b)(1)	(A)(i).			
2	\blacksquare			(ii). (Attach Schedule E							
3	=		•	e organization described		•		-			
4	∐^	medical research o	rganızatıon operated	in conjunction with a ho	spital de	scribed	ın sectio	on 170(l) (1)(A)(iii). Ente	r the hospital's
		ame, city, and state									
5	_1՝	70(b)(1)(A)(iv). (Cor	nplete Part II)	a college or university of			-		nental ur	nit descr	ıbed ın section
6 7	ш.	, ,		vernmental unit describe							
-	님	section 170(b)(1)(A	A)(vi). (Complete Pari			_	ernmenta	ai unit o	r from ti	ne gener	al_public,described
8	=	•		0(b)(1)(A)(vi). (Complete							
9	∟ _{re} u	elated to its exempt fi	unctions - subject to c	re than 33-1/3% of its suppertain exceptions, and (2 on 511 tax) from business) no more	e than 33	3-1/3% o	fits sup	port fron	n gross ir	nvestment income and
10			•	clusively to test for pub	•						
11	ലം	upported organization	zed and operated exclusions described in section on and complete lines	usively for the benefit of, to n 509(a)(1) or section 50 s 11e through 11h	perform 9(a)(2)	the fund See sec	tions of, tion 509	or carry (a)(3). C	out the p heck the	urposes box tha	of one or more publicly t describes the type of
	а	i∏Type I b	Type II c	X Type III - Function	ally inte	grated	d	ו 🗍 ו	ype III -	– Non-fu	inctionally integrated
е	ᆸ	By checking this box, ther than foundation section 509(a)(2)	I certify that the orga managers and other	nization is not controlle than one or more public	d directly	y or ındı orted orç	rectly by ganizatio	one or ons desc	more di cribed in	squalifie section	ed persons 509(a)(1) or
f	lf	. , . ,	ceived a written deter	mination from the IRS th	nat is a	Гуре І, Т	Гуре II о	r Type I	II suppo	rtıng org	anization,
g	S	Since August 17, 200	06, has the organization	on accepted any gift or	contribu	tion fron	n any of	the foll	owing pe	ersons?	
3							-				Yes No
	(i	 A person who of below, the gove 	firectly or indirectly co erning body of the sup	ontrols, either alone or to oported organization?	ogether v	with pers	sons des	cribed	ın (ıı) an	ıd (III)	11 g (i) X
	(i	ii) A famıly memb	er of a person describ	ped in (i) above?							11 g (ii) X
	•	_		described in (i) or (ii) ab	ove?						11 g (iii) X
h	•	•	•	e supported organization							119 (III) A
		i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(IV) Is organiza column (i) your gor docur	ation in Histed in Verning	(v) Did you the organize column (i) supp	zation in	(vi) la organiza colum organiza U S	ation in in (i)	(vii) Amount of monetary support
					Yes	No	Yes	No	Yes	No	
					162	140	163	140	1.63	140	
(A)	Yal	e University	06-0646973	2	Х		х		х		563,160.
(B)									ļ	<u> </u>	
(C)											
(D)											
(E)				 				-	1		
Total		· · · · · · · · · · · · · · · · · · ·									563,160.
BAA	For I	Paperwork Reduction	on Act Notice, see the	Instructions for Form 9	990 or 99	90-EZ.			Schedul	e A (Fo	rm 990 or 990-EZ) 2012

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

Sec	tion A. Public Support	 -					-
	ıdar yeàr (or fiscal year ıning 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')				-		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support	,		1	1	1	
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ties, etc (see ins	tructions)			12	
13	First five years. If the Form 990 organization, check this box and		ation's first, secon	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	blic Support l	Percentage				
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	e 11, column (f))		14	%
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14			15	<u>%</u>
16 a	33-1/3% support test — 2012. If and stop here. The organization				d the line 14 is 33	-1/3% or more, ch	neck this box ►
t	33-1/3% support test — 2011. If t and stop here. The organization				a, and line 15 is 3	3-1/3% or more, c	heck this box ►
17 a	n 10%-facts-and-circumstances to or more, and if the organization in the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this l	box and stop here	. Explain in Part l'	V how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstances test The organiza	s' test, check this l ition qualifies as a	box and stop here publicly supporte	. Explain in Part l d organization	V how the ►
18	Private foundation. If the organiz	zation did not che	eck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	box and see insti	ructions

	(Complete only if you check	ed the box on lin	e 9 of Part I or if t	the organization fa	alled to qualify und	ler Part II. If the org	anızatıon faıls
	to qualify under the tests lis	ted below, please	e complete Part II)			
	tion A. Public Support		4,000	L 4-> 0010	(B 0011	4) 2010	
1	dar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c	: Add lines 7a and 7b		<u></u>				
8	Public support (Subtract line 7c from line 6)						
<u>Sec</u>	tion B. Total Support		****		· · · · · · · · · · · · · · · · · · ·		
	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6 Gross income from interest, 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						
11	: Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is	s for the organiza	ation's first, secon	d. third. fourth. or	fifth tax year as a	section 501(c)(3)	
	First five years. If the Form 990 is organization, check this box and						<u> </u>
	tion C. Computation of Pul					·····	
	Public support percentage for 201		· · ·	e 13, column (f))		15	ક
	Public support percentage from 2					16	<u> </u>
	tion D. Computation of Inv						
17	Investment income percentage fo			•	nn (f))	17	8
18	Investment income percentage fro					18	ક
	33-1/3% support tests — 2012. If is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies a	s a publicly suppo	rted organization	▶
t	33-1/3% support tests — 2011. If Ine 18 is not more than 33-1/3%,	the organization, check this box a	did not check a board stop here. The	ox on line 14 or lii e organization qua	ne 19a, and line 10 alifies as a publicly	6 is more than 33-1 supported organization	/3%, and ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form 990 or 9	90-EZ) 2012	Yale Uı	niversity	y Eliza	abethan	Club Corp	06-0332975	Page 4
Part IV	Supplement Part II, line (See instruc	al Informat	ti on. Com and Part	plete this p III, line 12.	art to p Also co	rovide the implete th	explanation is part for a	is required by Part II, I ny additional informati	ine 10; on.
								· 	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Part IV, lines

Atta

Ya]	e University Elizabethan Clu	b Corp	06-0332975
Par		r Advised Funds or Other Similar Fu	nds or Accounts. Complete if
	the organization answered 'Yes'	to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and don are the organization's property, subject to the	or advisors in writing that the assets held in don organization's exclusive legal control?	or advised funds
6		s, and donor advisors in writing that grant funds of the donor or donor advisor, or for any other p	
Par	t II Conservation Easements. Comp	olete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e.g., re	ecreation or education) Preservation of	of an historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space	<u></u>	
2	Complete lines 2a through 2d if the organization	on held a qualified conservation contribution in the	ne form of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
	Total number of conservation easements		2a
	Total acreage restricted by conservation easer	ments	2b
	Number of conservation easements on a certif		2c
•	structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histori	2 d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or terminate	d by the organization during the
4	Number of states where property subject to co	nservation easement is located	_
5	Does the organization have a written policy reand enforcement of the conservation easemen	garding the periodic monitoring, inspection, hand its it holds?	dling of violations, Yes No
6	Staff and volunteer hours devoted to monitorin	ig, inspecting, and enforcing conservation easen	nents during the year
7	Amount of expenses incurred in monitoring, in	specting, and enforcing conservation easements	s during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote t conservation easements	orts conservation easements in its revenue and o the organization's financial statements that de	expense statement, and balance sheet, and scribes the organization's accounting for
Pai	Organizations Maintaining Collection Complete if the organization ans	ections of Art, Historical Treasures, of wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets. 8.
1	If the organization elected, as permitted under art, historical treasures, or other similar asset in Part XIII, the text of the footnote to its finan	SFAS 116 (ASC 958), not to report in its reveni s held for public exhibition, education, or research cial statements that describes these items	ue statement and balance sheet works of ch in furtherance of public service, provide,
	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items	SFAS 116 (ASC 958), to report in its revenue s ld for public exhibition, education, or research in	tatement and balance sheet works of art, a furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	► \$0.
	(ii) Assets included in Form 990, Part X		►\$ 515,485
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets fo 116 (ASC 958) relating to these items:	
	a Revenues included in Form 990, Part VIII, line	:1	► \$
	b Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2012 Yale	University	Elizabethan	Clu	b Corp	06-033			Page 2
Part III Organizations Maintai	ning Collection	ons of Art, Histo	rical	Treasures, or C	Other Similar Ass	ets (co	ntinue	ed)
3 Using the organization's acquisition items (check all that apply)	on, accession, and	d other records, chec	k any	of the following that	t are a significant use	of its co	llection	1
a Public exhibition		d Loan o	or exch	nange programs				
b X Scholarly research		e Other		·				
c X Preservation for future genera								
4 Provide a description of the organ Part XIII.			-			ın		
5 During the year, did the organizat to be sold to raise funds rather that	an to be maintain	ed as part of the org	ıanızat	tion's collection?		Yes		No
Part IV Escrowand Custodial A reported an amount or	Arrangements. n Form 990, Pa	Complete if the o art X, line 21.	rganı	zation answered	Yes' to Form 990	, Part IV	/, line !	9, or
1 a Is the organization an agent, trust on Form 990, Part X?		•			essets not included	Yes		No
b If 'Yes,' explain the arrangement	in Part XIII and co	emplete the following	table table	:				
						Amount		
c Beginning balance					1 c			
d Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance2a Did the organization include an ai	mount on Form 90	O Part V line 212			1 111	Yes		No
b If 'Yes,' explain the arrangement			on has	s been provided in l	Pa rt XIII	☐ 1e3	-	վ՝՝՝
bit res, explain the arrangement	in ar Am Onco	Chere if the explaint	ori riu.	3 been provided in i	are Am			
Part V Endowment Funds. C	omplete if the	organization an	swer	ed 'Yes' to Forn	n 990, Part IV, Iır	e 10.		
	(a) Current	(b) Prior yea		(c) Two years	(d) Three years		our year	rs
1 a Beginning of year balance	1,959,37	5. 2,153,2	65.	1,135,155	. 1,098,537	. 1,	055,	094.
b Contributions		-214,3	55.	800,100	. 0		10,	100.
c Net investment earnings, gains, and losses	563,16	551,8	63	716,179	579,100		630.	711.
d Grants or scholarships	303,10	0.	0.	2,500				000.
Other expenditures for facilities and programs	9,11			16,289				632.
f Administrative expenses	541,15			479,380				736.
g End of year balance	1,972,27		$\overline{}$	2,153,265				537.
2 Provide the estimated percentage								
a Board designated or quasi-endow	vment ►	8						
b Permanent endowment	8							
c Temporarily restricted endowmer	nt ►	<u> </u>						
The percentages in lines 2a, 2b,	and 2c should equ	ual 100%						
3a Are there endowment funds not a organization by:	n the possession	of the organization t	hat are	e held and admınıst	ered for the	[Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)	Х	
b If 'Yes' to 3a(II), are the related of	organizations liste	d as required on Sch	nedule	R?		3b	Х	
4 Describe in Part XIII the intended	duses of the orga	nızatıon's endowmer	nt fund	ls.				
Part VI Land, Buildings, and						т		
Description of property	(a)	Cost or other basis (investment)		Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land			<u></u>			ļ		·····
b Buildings		1,030,390.				1 1	,030	,390.
c Leasehold improvements			<u> </u>			<u> </u>		
d Equipment	<u> </u>		L			ļ		
e Other		515,485.	<u> </u>			ļ		<u>,485.</u>
Total. Add lines 1a through 1e. (Column	nn (d) must equal	Form 990, Part X, c	olumn	(B), line 10(c).)	0-1	11		,875.
BAA					Sche	dule D (l	orm 99	JU) 2012

Dart VIII	Investments – Other Securities. S	en Form 000 Part Y	line 12	29/5 Fage 3
rait VII	(a) Description of security or category	(b) Book value	(c) Method of valuation (
<u></u>	(including name of security)		end-of-year market v	alue
• •	cial derivatives	·· ·······		
	y-held equity interests			
(3) Other				
(A) (B)				<u> </u>
(B)				
(C)		-		-
(D) (E)				
(E) (F)				
(G) (G)				
(H)		· — 		
(l) 		-		
	mn (b) must equal Form 990, Part X, column (B) line 12.)	-		
	Investments — Program Related. S		line 13	
I GIL VIII	(a) Description of investment type	(b) Book value	(c) Method of valuation	Cost or
	(-)	(-)	end-of-year market v	
(1)				· · · · · · · · · · · · · · · · · · ·
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	(1) 15 000 5 14 1 (0) 1			
	mn (b) must equal Form 990, Part X, column (B) line 13.)	▶		
Part IX	Other Assets. See Form 990, Part 2	N, IINE 15. Description		(b) Book value
(1) Va I	Le University Endowment Funds			1,972,270.
(2)	te University Endowment Funds	<u> </u>		1,912,210.
(3)	· · · · · · · · · · · · · · · · · · ·			
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Co	olumn (b) must equal Form 990, Part X, columi	n (B), line 15.)	>	1,972,270.
Part X	Other Liabilities. See Form 990, Pa	art X, line 25.		
	(a) Description of liability	(b) Book value		
(1) Fed	eral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	mm (b) must equal Form 990, Part X, column (B) line 25.)	<u>▶ </u>		
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footn 8 (ASC 740). Check here if the text of the footnote has been	ote to the organization's financial :	statements that reports the organization's liability fo	r uncertain tax positions
unuel fill 4	o (AGO 740). Officer field if the text of the foothole has been	Provided in Cart VIII	·····	

	16-0332975 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Return
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains on investments	_
b Donated services and use of facilities 2b	_
c Recoveries of prior year grants	
d Other (Describe in Part XIII)	_
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII)	_
c Add lines 4a and 4b	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Return
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities 2a	
b Prior year adjustments	_
c Other losses 2c	_
d Other (Describe in Part XIII.)	-
e Add lines 2a through 2d	_ 2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	-
c Add lines 4a and 4b	_ _{4c}
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Part XIII Supplemental Information	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	, lines 1b and 2b; Part V, additional information
Pt V Line 4 See Schedule O, Part V, Line 4	
Pt_III_Line_4The Club_maintains_a collection_of_rare_books, manu	scripts
and letters from the Elizabethan period in order to	<u> </u>
further the organization's exempt purpose of the	
promotion of literature from this period within the	£
Yale University community.	
BAA	Schedule D (Form 990) 2012

ochedule D	(10H1 930) 2012 Tale University Elizabethan Club Corp	06-0332975	raye 3
Part XIII	Supplemental Information (continued)		
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	·		
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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.

201

OMB No 1545-0047

Open to Public Inspection

Employer Identification number 06-0332975 Yale University Elizabethan Club Corp Part | General Information on Grants and Assistance Name of the organization

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

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

<u>≗</u> □ X Yes

Part II 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. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(a) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) New Haven Public Library - 133 Elm Street	06-6001876		12,000.	°	0. Cash	N/A	Gen'l support
(2) Intl_Festival_of_Arts	06-1444222		12,000.	0	0. Cash	N/A	Gen'l support
·							
(4)							
(5)							
(6)							
<u>w</u>							
(8)							
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	 and government orgons listed in the line 1 		isted in the line 1 table				
- 1							

Schedule I (Form 990) (2012)

TEEA3901 11/30/12

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

Page 2 06-0332975 Yale University Elizabethan Club Corp

Schedule I (Form 990) (2012)

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. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other N/A (e) Method of valuation (book, FMV, appraisal, other) ___The_Elizabethan Club_follows_all_procedures_as_established_by_Yale <u> University for monitoring the use of grant funds in the U.S.</u> 0. Cash (d) Amount of non-cash assistance 1,000 (c) Amount of cash grant (b) Number of recipients Rose: design/certificates additional information. (a) Type of grant or assistance Pt_I_Line_2_ Pt_I Line_2 Part IV æ. က 4 S 9

BAA

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization	Employer identification number
Yale University Elizabethan Club Corp	06-0332975
Pt. VI, Line 12c Yale University provides written policies on.	all_of_the
Pt VI, Line 15a subjects contained in line 12 through 15 and	the
Pt VI, Line 15b Elizabethan Club follows these policies.	
Pt VI, Line 11b Form 990 is reviewed by the Chair of the Boar	d of
Directors and staff prior to filing. After f	iling it
is reviewed by the entire Board of Directors	and
Officers.	
Pt III, Lns 1 & 4a Form 990, Part III, Line 1 and 4a:	·
See statement attached.	
Pt VI-C, Line 19 The Elizabethan Club will respond to written	requests for
information about the coporation such as gove	erning
documents, conflict of interest policies and	financial
statements.	
	
Pt XI, Line 2c Form 990, Part XI, Financial Statements and I	Reporting:
The Elizabethan Club's financial statements	are audited
as part of the audit of Yale University's fire	nancial
statements.	
Sched A, Ln 11f Form 990, Schedule A, Line 11f:	
See attached copy of IRS Classification Lett	er_dated
May 12, 2008	
Sched_D, Pt_XIV Form 990, Schedule_D, Endowment Funds, Line_	<u>4:</u>
See statement attached.	

Name of the organization	mployer Identification number
Yale University Elizabethan Club Corp 0	6-0332975
Pt XI, Line 8 Addition to FYE 6/30/12 Lapel pin inventory (add	litional
item_found)	
	+
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~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	

Schedule **0** (Form 990 or 990-EZ) 2012

Page 2

YALE UNIVERSITY ELIZABETHAN CLUB CORPORATION EIN 06-0332975 FORM 990 - FYE 6/30/13

Part III, Line 1 and Line 4a

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

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

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

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

YALE UNIVERSITY ELIZABETHAN CLUB CORPORATION EIN 06-0332975 FORM 990 - FYE 6/30/13

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

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

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2012

OMB No 1545-0047

Open to Public Inspection

Employer identification number 06-0332975 Department of the Treasury Internal Revenue Service Name of the organization

(f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (e) End-of-year assets Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) **(d)** Total income (c)
Legal domicile (state or foreign country) (b)
Primary activity Yale University Elizabethan Club Corp Part II $|\epsilon|$ ල 8

(g) Sec 512(b)(13) controlled entity? ŝ Yes (f)
Direct controlling
entity 509(a) (3) Type 1 N/A (e)
Public charity status
(if section 501(c)(3)) (d) Exempt Code section 501(c)(3) (c) .
Legal domicile (state or foreign country) 당 (b)
Primary activity Educational Purposes | | | | (a) (a) Name, address, and EIN of related organization -- New Haven, CT 06511-8913 -- -(1) Yale University __100 Wall Street 06-0646973 | | | 1 3 ල €, Schedule R (Form 990) 2012

TEEA5001 12/28/12

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

Page 2

06-0332975

Schedule R (Form 990) 2012 Yale University Elizabethan Club Corp

Schedule R (Form 990) 2012 (D) Sec 512(b)(13) controlled entity? No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Yes General or managing partner? ŝ (h) Percentage ownership Yes Code V-UBI amount in box 20 of Schedule K-1 (Form (g) Share of end-of-year assets Dispropor-tionate allocations? £ Ξ Yes (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp,
or trust) (f) Share of total income (d)
Direct
controlling
entity TEEA5002 12/28/12 Predominant income (related, unrelated, excluded from tax under sections 512-514) (c)
Legal domicile
(state or foreign country) (d)
Direct
controlling
entity (b) Primary activity (c) Legal domicile (state or foreign country) (a) Name, address, and EIN of related organization (b)
Primary activity (a)
Name, address, and EIN of related organization Part IV Part III BAA E Ξ Ø ල **⊗**¦ ල

Schedule R (Form 990) 2012 Yale University Elizabethan Club Corp

r 36.)
, 35b, oı
line 34, 35b, or 36.)
art IV, I
990, P
'Yes' to Form 990,
'Yes' t
nswered
organization ar
lete if the
ns (Complete
Organizations (
Related
Transactions With
Part V

Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule.				Yes	2
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	Inizations listed in Parts II-N	ن	<u> </u>		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					×
b Gift, grant, or capital contribution to related organization(s)			1P		×
c Gift, grant, or capital contribution from related organization(s)	•	•	10		×
d Loans or loan quarantees to or for related organization(s)			1d		×
e Loans or loan quarantees by related organization(s).] e		×
f Dividends from related organization(s)			-		×
q Sale of assets to related organization(s)			19		×
		-	=		×
		-	=		×
i Lease of facilities, equipment, or other assets to related organization(s)					×
			-	,	>
K Lease of facilities, equipment, of other assets from related organization(s)			-		۲
Ferrormance of services of mempership of fundashing solicitations for related organization(s)	•	-	E		:
Performance of services of membership of jurioralship solicitations					{ ×
n Snaring of facilities, equipment, mailing lists, of other assets with related organization(s)			:],		: ا
o Sharing of paid employees with related organization(s)		•	<u>-</u>		×
					>
p Keimbursement paid to related organization(s) for expenses		-			ډ >
q Reimbursement paid by related organization(s) for expenses			<u>-</u>		×
r Other transfer of cash or property to related organization(s)			-	1	×
s Other transfer of cash or property from related organization(s)			18		×
	uding covered relationships	and transaction thresho	spi		
	(b) Transaction type (a-s)	(c) Amount involved	ab a	(d) thod of determin amount involved	bung Pa
(1)					
(3)					
(4)					
(5)					
(9)					
BAA TEEA5003 12/28/12		Schedu	Schedule R (Form 990) 2012	л 990) 2	2012

Schedule R (Form 990) 2012 Yale University Elizabethan Club Corp

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

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

revenue) that was not a related organization See Instructions regarding exclusion log certain investment barniers inby	anization See Instr	uctions regarding e	xcidsion ioi certaii	וואמאווומווו	Jartinerships					
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	Share of	(g) Share of	(h) Dispropor-	Code V-UBI	General or	(k) Or Percentage
		country)	(related, unre- lated, excluded	501(c)(3) organizations?		assets	allocations	20 of Schedule K-1 Form (1065)		
	-		section 512-514)	Yes No			Yes No	,	Yes	S S
(1)										
	1									
	,									
(2)										
	-1									
										-
(3)										
(4)			:							
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6										
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(8)										
	1.									
	·-									
ВАА			3E	TEEA5004 12/28/12				Schedule		R (Form 990) 2012

Schedule R	(Form 990) 2012 Yale University Elizabethan Club Corp	06-0332975	Page 5
Part VII	Supplemental Information		
	Complete this part to provide additional information for responses to questions (see instructions).	on Schedule R	
	`		
			.
		. – – – – – – –	
		·	
		. – – – – – – –	
		. – – – – – – – –	

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

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Honoraria	4,000.	4,000.	0.	0.
Food and beverages	60,921.	60,921.	0.	0.

Supporting Statement of:

Form 990 p 10/Line 13 col (A)

Description	Amount
Printing and publications	18,415.
Postage and shipping	4,553.
Bank service charges	140.
Total	23,108.

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
Printing and publications	18,415.
Postage and shipping	4,553.
Bank service charges	140.
Office supplies	213.
Total	23,321.

Supporting Statement of:

Form 990 p 10/Line 14 col (A)

Description	Amount
Equipment rental & maintenance	2,286.
Total	2,286.

Supporting Statement of:

Form 990 p 10/Line 14 col (B)

Description	Amount
Equipment rental and maintenance	2,286.
Total	2,286.

Supporting Statement of:

Form 990 p 10/Line 16 col (A)

Description	Amount
Utilities Taxes: real and personal property	14,669. 19,830.
Total	34,499.

Supporting Statement of:

Form 990 p 10/Line 16 col (B)

Description	Amount
Utilities Taxes: real and personal property	14,699. 19,830.
Total	34,529.

Supporting Statement of:

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

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

Supporting Statement of:

Form 990 p 12/Part XI, Line 8

Description	Amount
Addition to FYE 6/30/12 Lapel pin inventory (additional item found)	9.
Total	9.

Supporting Statement of:

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

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

Supporting Statement of:

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

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

Supporting Statement of:

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

Description	Amount
Expenses paid directly from funds	10,932.
Rare book purchase directly from funds	835.
Total	11,767.