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Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052
2012
Open to Public Inspection

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2012, or tax year beginning 07-01-2012 , and ending 06-30-2013

Name of foundation ROCKEFELLER ARCHIVE CENTER		A Employer identification number 20-8030810
Number and street (or P O box number if mail is not delivered to street address) Room/suite 15 DAYTON AVENUE		B Telephone number (see instructions) (914) 366-6308
City or town, state, and ZIP code SLEEPY HOLLOW, NY 10591		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 119,229,621	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,306,278			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,424	1,424	1,424	
	4 Dividends and interest from securities	5,494,829	5,494,829	5,494,829	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	<input type="checkbox"/> 25,644				
12 Total. Add lines 1 through 11	6,828,175	5,496,253	5,496,253		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	770,540			671,679
	14 Other employee salaries and wages	2,368,847			2,245,388
	15 Pension plans, employee benefits	848,219			870,483
	16a Legal fees (attach schedule)	<input type="checkbox"/> 42,644			13,404
	b Accounting fees (attach schedule)	<input type="checkbox"/> 42,000			12,410
	c Other professional fees (attach schedule)	<input type="checkbox"/> 665,750	477,063	477,063	188,110
	17 Interest	-1,779			
	18 Taxes (attach schedule) (see instructions)	<input type="checkbox"/> 52,200		52,200	
	19 Depreciation (attach schedule) and depletion	<input type="checkbox"/> 504,242			
	20 Occupancy	922,204			732,038
	21 Travel, conferences, and meetings	123,024			114,303
	22 Printing and publications	13,336			12,740
	23 Other expenses (attach schedule)	<input type="checkbox"/> 246,922			299,444
	24 Total operating and administrative expenses. Add lines 13 through 23	6,598,149	477,063	529,263	5,159,999
	25 Contributions, gifts, grants paid	99,290			99,290
26 Total expenses and disbursements. Add lines 24 and 25	6,697,439	477,063	529,263	5,259,289	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	130,736				
b Net investment income (if negative, enter -0-)		5,019,190			
c Adjusted net income (if negative, enter -0-)			4,966,990		

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

Part II Balance Sheets		Beginning of year			End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	6,494	46,951	46,951	46,951	
	2	Savings and temporary cash investments	1,115,167	195,938	195,938	195,938	
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable	9,000	8,500	8,500	8,500	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)					
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges	30,302	20,433	20,433	20,433	
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	90,790,440	97,265,222	97,265,222	97,265,222	
	14	Land, buildings, and equipment basis ▶ <u>20,711,975</u> Less accumulated depreciation (attach schedule) ▶ <u>1,988,105</u>	19,010,742	18,723,870	18,723,870	18,723,870	
15	Other assets (describe ▶ _____)	2,772,903	2,968,707	2,968,707	2,968,707		
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	113,735,048	119,229,621	119,229,621	119,229,621		
Liabilities	17	Accounts payable and accrued expenses	505,903	569,126	569,126		
	18	Grants payable					
	19	Deferred revenue	3,169,748	2,833,402	2,833,402		
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶ _____)	270,743	5,000	5,000		
23	Total liabilities (add lines 17 through 22)	3,946,394	3,407,528	3,407,528			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>						
	and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted	52,768,348	55,330,686	55,330,686		
	25	Temporarily restricted	35,122,656	38,593,757	38,593,757		
	26	Permanently restricted	21,897,650	21,897,650	21,897,650		
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/>						
	and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
28	Paid-in or capital surplus, or land, bldg, and equipment fund						
29	Retained earnings, accumulated income, endowment, or other funds						
30	Total net assets or fund balances (see page 17 of the instructions)	109,788,654	115,822,093	115,822,093			
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	113,735,048	119,229,621	119,229,621			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	109,788,654
2	Enter amount from Part I, line 27a	2	130,736
3	Other increases not included in line 2 (itemize) ▶ _____	3	5,902,703
4	Add lines 1, 2, and 3	4	115,822,093
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	115,822,093

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			
	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	5,740,491	92,760,503	0.06189
2010	5,883,558	90,793,519	0.06480
2009	5,192,209	87,424,391	0.05939
2008	4,678,455	95,890,788	0.04879
2007			

2	Total of line 1, column (d).	2	0.23487
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.05872
4	Enter the net value of noncharitable-use assets for 2012 from Part X, line 5.	4	94,509,928
5	Multiply line 4 by line 3.	5	5,549,339
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	50,192
7	Add lines 5 and 6.	7	5,599,531
8	Enter qualifying distributions from Part XII, line 4.	8	5,670,088

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	50,192
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2.	3	50,192
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	50,192
6	Credits/Payments		
a	2012 estimated tax payments and 2011 overpayment credited to 2012	6a	47,200
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	30,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d.	7	77,200
8	Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	247
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	26,761
11	Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> 26,761 Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		No
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> NY _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	Yes	
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address www.rockarch.org	13	Yes	
14	The books are in care of Camelia Muresan Telephone no (914) 366-6370 Located at 15 DAYTON AVENUE SLEEPY HOLLOW NY ZIP+4 10591			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country	16		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b	No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20___, 20___, 20___, 20___		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b	No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20___, 20___, 20___, 20___		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.</i>)	3b	No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions). Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here.

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CAROL RADOVICH 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	83,598	17,394	
MICHELE J HILTZIK 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	86,127	19,257	
ROBERT BATTALY JR 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	86,127	17,539	
ERWIN LEVOLD 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	SENIOR RESEARCH AR 35 00	89,028	23,490	
LEE R HILTZIK 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	90,351	43,874	

Total number of other employees paid over \$50,000. 21

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEW YORK, NY 10065	FINANCIAL SERVICES	477,063

Total number of others receiving over \$50,000 for professional services. ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1 ARCHIVAL PROGRAM - The Rockefeller Archive Center is an independent operating foundation that preserves and makes available for research the archival collections of members of the Rockefeller family, institutions and organizations founded by Rockefeller family members (including the Rockefeller Foundation, Rockefeller Brothers Fund, Winthrop Rockefeller Foundation, General Education Board, Rockefeller University, Population Council, Asia Society, and many other organizations) and the records of other philanthropic and service organizations such as the Ford Foundation, the Commonwealth Fund, Russell Sage Foundation, WT Grant Foundation, Markle Foundation, the Social Science Research Council and the Foundation Center. The Center also holds extensive collections of the personal papers of trustees, officers, faculty, and associates who were affiliated with these institutions. The Archive Center is located in Hillcrest, a home of Westchester County field stone built for Martha Baird Rockefeller.	5,604,118
2 RESEARCH & EDUCATION - The Research and Education Department oversees many of the external programs of the Rockefeller Archive Center. It administers a competitive grant program that awards 40 to 50 research grants each year to graduate students, faculty members, and independent scholars. It organizes and hosts several workshops and conferences each year. And staff members on the research and education team edit and publish a series of research reports describing scholarly work at the RAC, a publishing program that is now primarily electronic and web-based. The 2009 renovation of the Archive Center's Carriage House provides space for the research and education staff as well as three to six visiting scholars. The scholar-in-residence program serves researchers who have done research at the Archive Center and learned that they need to spend an extended period of time, ranging from several months to a full academic year, on their archival research. The educational programs engage a number	931,983
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1	
2	
All other program-related investments. See page 24 of the instructions.	
3	

Total. Add lines 1 through 3. ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	94,603,282
b	Average of monthly cash balances.	1b	1,345,883
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	95,949,165
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	95,949,165
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,439,237
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	94,509,928
6	Minimum investment return. Enter 5% of line 5.	6	4,725,496

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2012 from Part VI, line 5.	2a	
b	Income tax for 2012 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	5,259,289
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	410,799
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,670,088
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	50,192
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	5,619,896

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2012				
a From 2007.				
b From 2008.				
c From 2009.				
d From 2010.				
e From 2011.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ _____				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2012 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2012 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9				
a Excess from 2008.				
b Excess from 2009.				
c Excess from 2010.				
d Excess from 2011.				
e Excess from 2012.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling.						2006-06-20
b Check box to indicate whether the organization is a private operating foundation described in section <input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)						
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total	
	(a) 2012	(b) 2011	(c) 2010	(d) 2009		
	4,725,496	4,638,025	4,539,676	4,371,220	18,274,417	
b 85% of line 2a	4,016,672	3,942,321	3,858,725	3,715,537	15,533,255	
c Qualifying distributions from Part XII, line 4 for each year listed	5,670,088	5,787,603	5,935,256	5,251,174	22,644,121	
d Amounts included in line 2c not used directly for active conduct of exempt activities						
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	5,670,088	5,787,603	5,935,256	5,251,174	22,644,121	
3 Complete 3a, b, or c for the alternative test relied upon						
a "Assets" alternative test—enter						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	3,150,330	3,092,016	3,026,450	2,914,146	12,182,942	
c "Support" alternative test—enter						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed
 GRANTS ADMINSTRATOR
 15 DAYTON AVENUE
 SLEEPY HOLLOW, NY 10591
 (914) 366-6311

b The form in which applications should be submitted and information and materials they should include
 GRANTEES COMPLETE A FOUR-PAGE APPLICATION AND MAIL IT TO THE ADDRESS PROVIDED ABOVE APPLCANTS MAY ALSO E-MAIL AN APPLICATION TO RACGRANTS@ROCKARCH.ORG

c Any submission deadlines
 NOVEMBER 15TH OF EACH CALENDAR YEAR AWARDS ARE ANNOUNCED I

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
 AWARDS ARE MADE TO INDIVIDUALS INSTITUIONS ARE NOT ELIGIBLE TO APPLY THE GRANT DOES NOT SUPPORT RESEARCH AT OTHER INSTITUTIONS, AND IT DOES NOT PROVIDE GENERAL TUITION SUPPORT APPLICATION TO THE GRANT-IN-AID PROGRAM IS OPEN TO U S CITIZENS AND CITIZENS OF FOREIGN COUNTRIES CERTAIN U S GOVERNMENT REQUIREMENTS WILL APPLY TO NON-U S CITIZENS

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total				3a 99,290
b <i>Approved for future payment</i>				
Total				3b

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code... a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets b Other transactions (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship

Sign Here 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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge Signature of officer or trustee Date Title

Paid Preparer Use Only Print/Type preparer's name Preparer's Signature Date Check if self-employed PTIN Firm's name Firm's address Firm's EIN Phone no

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAMES A SMITH 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Vice President 35 00	183,000	39,776	
ROBERT D ROSENDALE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	COO 35 00	204,000	40,996	
JACK MEYERS 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	President 35 00	230,000	72,768	
ERIC WANNER 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Trustee 1 00	0		
MEGAN SNIFFIN-MARINOFF 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Trustee 1 00	0		
JUDITH RODIN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Trustee 1 00	0		
DAVID ROCKEFELLER JR 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Trustee 1 00	0		
MARC TESSIER-LAVIGNE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Trustee 1 00	0		
STEPHEN HEINTZ 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Trustee 1 00	0		
FREDERICK M BOHEN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Sec/Tres 1 00	0		
NEIL L RUDENSTINE 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	Chairman 1 00	0		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Trygve Throntveit Hanover St Hanover, NH 03755	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,116
Thomas Adam 2806 Hollywood Drive Arlington, TX 76013	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,500
Shi Yan 5 Arts Link Level 3 Singapore, Singapore 117570 CH	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	4,000
Shaloma Gauthier Toronto Ontario, Ontario M2L 1J4 CA	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,335
Robin Wolfe Scheffler 400 West 43rd Street 37S New York, NY 10036	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	197
Rob Aitken 10717 126 Street Edmonton, Edmonton T5M 0N9 CA	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	4,000
Renata Nowaczewska UL Izerska 1 Szczecin, Szczecin 71-497 PL	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	3,944
Rebecca Jinks 82 Acre Lane Brixton, Brixton SW25QN UK	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	3,000
Rebecca Herman 73 3rd Street suite 34 Los Altos, CA 94022	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,456
Pierangelo Castagneto 1 Georgi Izmirliiev Square Blagoevgrad, Blagoevgrad 2700 BU	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,995
Peter Weber 700 North Alabama Street Indianapolis, IN 46204	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,000
Natasha Sarkar 2060 N High Street Apt 230 Columbus, OH 43201	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,500
Marina Dahlquist Floragatan 11 Stockholm, Stockholm 11431 SW	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,999
Marie Scot 29 rue des Boulangers Paris, Paris 75005 FR	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	3,000
Margaret W Rossiter 100 Fairview Square 4K Ithaca, NY 14850	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Marcellus Barksdale 830 Westview Drive Atlanta,GA 30314	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,023
Ludovic Tournes 4 Impasse des Jardies Meudon,Meudon F-92190 FR	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,776
Lisa Levenstein 208 Mill Race Dr Chapel Hill,NC 27514	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,500
Lei Zhang 132 Remington Avenue AptH Syracuse,NY 13210	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,500
Lance Thurner 287 E 139th Street Apt 4 Bronx,NY 10454	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	65
Kazumi Noguchi 1-2-12-301 Moriminami-machi Higashinada-ku,Higashinada-ku 658-0011 JA	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	4,000
Kara Schlichting 2 Stuyvesant Oval 6E New York,NY 10009	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	84
Kara Dixon Vuic 109 Brantley Circle High Point,NC 27262	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,000
Julia Foulkes 202 St Marks Avenue3 Brooklyn,NY 11238	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,000
Julia Cummiskey 716 N Washington Place 603 Baltimore,MD 21201	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	686
Josh Shepperd 1046 E Dayton Madison,WI 53703	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,000
Jonna Perrillo 3021 Aurora Avenue El Paso,TX 79930	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	4,000
Jadwiger Pieper Mooney 6168 N Via del Pichon Tucson,AZ 85718	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,500
Isabella Lohr Sperrstrasse 63 Basel,Basel 4057 SZ	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	123
Heidi G Frontani 1649 Falmouth Avenue New Hyde Park,NY 11040	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Fulvio Drago Via Trento 89/A Mezzolombardo, Mezzolombardo 3801 IT	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,697
Frederick Attal 52 Rue Henri Dunant Ermont, Ermont 95120 FR	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	3,000
Fernando Quesada 130 La Camzina MD 20 Carrodilla, Carrodilla CP5505 AR	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,060
Ethan Schrum 225 Kellogg Place Wheaton, IL 60187	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,500
Emily Merchant 410 N State St 10 Ann Arbor, MI 48104	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	4,848
Emily Baum 108 Radnor Avenue Villanova, PA 19085	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	899
Dyana Furmansky 707 Washington Street Denver, CO 80203	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,401
Debbie Sharnak 115 N Hancock Street Apt2 Madison, WI 53703	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,961
David Long 90 Fentman Avenue Ontario, Ontario K1S 0T8 CA	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	573
David Hammack 14206 South Woodland Road Shaker Heights, OH 44120	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,755
David Ekbladh 22 Whitfield Road Sommerville, MA 02144	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,200
Darren Dochuk 6803 Kingsbury Blvd Apt 2W St Louis, MO 63130	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,500
Daron L Calhoun II 830 Westview Drive Atlanta, GA 30314	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,023
Brinda Kumar 428 N Aurora Street Apt 5 Ithaca, NY 14850	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	905
Barona Vilar Av Blasco Ilanez 17 Valencia, Valencia 46010 SP	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	2,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Arnd Bauerkamper Druckemuhlenstrase 1 Melle, Melle 49328 GM	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	3,000
Ari Samsky 16 The Flume Amherst NH 03031 Amherst, NH 03031	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	1,669
Antonin Cohen 65 Quai de Valmy Paris, Paris 75010 FR	NONE	NONE	REIMBURSEMENT OF TRAVEL EXPENSES	3,000
Total			▶ 3a	99,290

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Schedule of Contributors

OMB No 1545-0047

▶ Attach to Form 990, 990-EZ, or 990-PF.

2012

Department of the Treasury
Internal Revenue Service

Name of the organization
ROCKEFELLER ARCHIVE CENTER

Employer identification number
20-8030810

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
ROCKEFELLER ARCHIVE CENTER

Employer identification number
20-8030810

Part I **Contributors** (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization
ROCKEFELLER ARCHIVE CENTER

Employer identification number
20-8030810

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization
ROCKEFELLER ARCHIVE CENTER

Employer identification number
20-8030810

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry
For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) \$
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

Additional Data

Software ID: 12000229
Software Version: 2012v2.0
EIN: 20-8030810
Name: ROCKEFELLER ARCHIVE CENTER

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Carnegie 437 Madison Avenue New York, NY 10022	\$ 150,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
9	SOCIAL SCIENCE RESEARCH COUNCIL ONE PIERREPORT PLAZA 15TH FL BROOKLYN, NY 11201	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
8	FOUNDATION FOR CHILD DEVELOPMENT 295 MADISON AVENUE 40TH FL NEW YORK, NY 10017	\$ 62,422	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
7	TACONIC FOUNDATION 100 WALL STREET 12TH FLOOR NEW YORK, NY 10005	\$ 100,356	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
6	FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	\$ 232,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
5	THE ROCKEFELLER FOUNDATION 420 FIFTH AVENUE NEW YORK, NY 10018	\$ 150,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
4	THE NEAR EAST FOUNDATION 900 S CROUSE AVENUE SYRACUSE, NY 13244	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<p><u>3</u></p>	<p>RUSSELL SAGE FOUNDATION 112 EAST 64TH STREET _____ NEWYORK, NY 10065 _____</p>	<p>\$ <u>10,000</u></p>	<p>Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)</p>
<p><u>2</u></p>	<p>THE COMMONWEALTH FUND ONE EAST 75TH STREET _____ NEWYORK, NY 10021 _____</p>	<p>\$ <u>85,000</u></p>	<p>Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)</p>
<p><u>1</u></p>	<p>THE ROCKEFELLER UNIVERSITY 1230 YORK AVENUE _____ NEWYORK, NY 10065 _____</p>	<p>\$ <u>500,000</u></p>	<p>Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)</p>

TY 2012 Accounting Fees Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Tax Preparation	7,000	0	0	2,068
Accounting & Auditing	35,000	0	0	10,342

TY 2012 Contractor Compensation Explanation

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Contractor	Explanation
THE ROCKEFELLER UNIVERSITY	

TY 2012 Investments - Other Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
THE ROCKEFELLER UNIVERSITY ENDOWMENT	FMV	97,265,222	97,265,222

TY 2012 Land, Etc. Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Miscellaneous	26,351	570	25,781	25,781
Land	4,838,000		4,838,000	4,838,000
Buildings	14,712,630	1,792,115	12,920,515	12,920,515
Machinery and Equipment	1,051,505	177,299	874,206	874,206
Furniture and Fixtures	42,994	8,599	34,395	34,395
Auto./Transportation Equip.	40,495	9,522	30,973	30,973

TY 2012 Legal Fees Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal	42,644	0	0	13,404

TY 2012 Other Assets Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Exhibition and Archival Art	2,500,505	2,500,505	2,500,505
CAPITAL PROJECTS IN PROGRESS	272,398	468,202	468,202

TY 2012 Other Expenses Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
scholarly conferences and workshops	13,622			15,134
POSTAGE AND SUPPLIES	100,777			90,463
Penalty	189			
PAYROLL SERVICE FEES	9,424			8,010
Office Expenses	7,849			6,723
MEMBERSHIPS	7,788			6,865
DIGITIZATION AND MICROFILMING	49,663			136,460
COMPUTER, SOFTWARE & LICENSING	54,573			33,188
Bank Charges	3,037			2,601

TY 2012 Other Income Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
copy service for research	25,644		

TY 2012 Other Liabilities Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Description	Beginning of Year - Book Value	End of Year - Book Value
Rounding	1	
DUE TO THE ROCKEFELLER UNIVERSITY	230,556	
EXCISE TAXES PAYABLE	40,186	5,000

TY 2012 Other Professional Fees Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FINANCIAL SERVICES/INVESTMENT FEES	477,063	477,063	477,063	0
ADVISORY & PROFESSIONAL SUPPORT	188,687	0	0	188,110

TY 2012 Taxes Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Software ID: 12000229

Software Version: 2012v2.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Federal Excise Tax	52,200		52,200	